

Music Sunday 2019 Registration Form

Please complete this form and return by post or email to:

Development, RSCM, 19 The Close, Salisbury SP1 2EB

development@rscm.com

Personal Details

Name of Organiser: _____ Organiser's Address: _____

Email Address: _____

Phone Number: _____ Postcode: _____

Individual or Student Member Friend Other

Member of an Affiliate Church, Choir or Other Organisation Non-member Organisation

Church/Choir/Organisation Name: _____

Event Details

Event Name: _____ Event Venue: _____

Event Date: _____ Venue Address: _____

Event Time: _____

Postcode: _____

Please give further details of your event below:

Please send me Gift Aid envelopes No. of envelopes required: _____

Please note: this event is supported by the RSCM but all responsibility for the event and arrangements remain with the church concerned.