



Cardiff Bach Choir
Côr Bach Caerdydd

APPLICATION FOR MEMBERSHIP

Please print

TITLE _____ NAME _____

ADDRESS _____

COUNTY _____ POST CODE _____

HOME TELEPHONE _____ WORK TELEPHONE (if appropriate)

MOBILE NO. _____ E MAIL _____

AGE (Please circle as appropriate - 20-30 : 30-40: 40-50 : 50-60 ; 60-70. over 70 (required for Ty Cerdd Membership)

VOICE S /A/T/ B SIGHT READING ABILITY None/ basic/ competent /confident

MUSICAL/CHORAL EXPERIENCE _____

PLEASE TELL US WHERE/HOW YOU FOUND OUT ABOUT THE CHOIR

Please print, complete and return this form to the Secretary

MRS DIANE DANIEL, 71 HEATH PARK AVENUE, HEATH , CARDIFF CF14 3 RG

Email diane.s.daniel@gmail.com TEL 02920339739 mobile 07714236481

Signed _____

Date _____

Registered Charity 1115503 Cardiff Bach Choir www.cardiffbachoir.org.uk

DSD/September 2017