

CONTACT DETAILS

Please give your age if under 18

Name	Emergency contact/ Next of kin
Address	
Landline	Mobile
Email	

MUSIC EXPERIENCE

Instrument	Music Grade Level (if any)		
How would you describe your level of play ? (please tick the boxes)			
Beginner	Intermediate	Advanced	Very Advanced
How good are you at (score 1-4, 4 being the highest)			
Sight Reading	Improvisation	Jazz Harmony	Keeping Rhythm
Scales, Chords and Modes		Soloing over Changing Harmony	
Experience of playing in bands?			
Lots	Some	Little	

SPECIAL NEEDS

Please list them here

How did you hear about us ?

Please either complete, save and send this form to neiljazzsax@outlook.com or post to Suffolk Jazz School Ltd, 32 Kingsfield Avenue, Ipswich, IP1 3TA.
When we have received your application form, we will send you further information on how you will be able to pay the course fee to our bank account.
Please tick here to confirm you have read and agreed to the terms and conditions.

Terms and Conditions

By signing this form, you are agreeing to book a place on this course provided by Suffolk Jazz School Ltd. Unfortunately, we cannot offer any refunds if you cancel or don't attend the course. We can also not accept any responsibility for any loss or injury while on the course.
We will use your personal data only for the purposes of your attendance on this course and we will send you some emails about any future courses or musical events which may be of interest. We will not pass your email address or other personal data onto third parties.
We may change course programme or tutor line-up

**IF YOU HAVE ANY QUERIES, PLEASE PHONE
NEIL ON 01473 251100 OR 07798 783574.**