

## **Dark Peak Music Foundation Registration Form 2023-24**

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This form must be returned as soon as possible.

It is very important that we have accurate and up to date information for communications and for the safety and well-being of children.

| Name of Player                                      |   |                          |   |           |  |
|---|---|--------------------------|---|-----------|--|
|   | Dark Peak Concert Bar                   | nd Frid                  | Friday 5.45-7.45pm Victoria Hall        |           |  |
|   | Dark Peak Intermediate Wind Bar         | <b>nd</b> Mo             | Monday 5-6pm Victoria Hall              |           |  |
|   | Chinley Junior Wind Ba                  | <b>nd</b> Mo             | Monday 3.45-4.45pm Chinley Comm. Centre |           |  |
|   | Glossop Junior Wind Bar                 | nd Frid                  | Friday 4.15-5.15pm Victoria Hall        |           |  |
| Ensemble/Class                                      | Senior Strings & Orchest                | tra Mo                   | Monday 6.15-8.30pm Glossopdale          |           |  |
| Please tick next to the ensemble(s) you are joining | Intermediate Strings & Orchest          | tra Mo                   | Monday 5-7.15 Glossopdale               |           |  |
|   | Glossop Junior Strin                    | <b>gs</b> Mo             | Monday 5-6pm Glossopdale                |           |  |
|   | Dark Peak Youth Orchest                 | <b>tra</b> Mo            | Monday 6.15-7.15pm Glossopdale          |           |  |
|   | Dark Peak Young Voic                    | es Tue                   | Tuesday 5-6.30pm Glossopdale            |           |  |
|   | Supertoni                               | cs We                    | ednesdays Whitfield                     | St James' |  |
| Instrument  |   |                          |   |           |  |
|   | Title (eg. Mr, Mrs, Miss, Ms, Dr.)      |                          |   |           |  |
| Name of Bassat (Grand For                           | First name                              |                          |   |           |  |
| Name of Parent/Guardian                             | Surname                                 |                          |   |           |  |
|   | Preferred personal address eg. First na | me                       |   |           |  |
| Postal Address                                      |   |                          |   |           |  |
|   |   |                          |   |           |  |
|   | Postcode                                |                          |   |           |  |
| Email Address                                       | 1 Osicoue                               |                          |   |           |  |
| Telephone   |   |                          |   |           |  |
| Alternative/Emergency Telephone                     |   |                          |   |           |  |
| School attended                                     |   |                          |   |           |  |
| Instrument Teacher                                  |   |                          |   |           |  |
| Type of lesson – please ring as appropriate         | Individual lesson                       | Pair lesson Group lesson |   |           |  |
| Approximate Grade                                   |   |                          |   |           |  |
| Date of Birth                                       |   |                          |   |           |  |
| Date Joined   |   |                          |   |           |  |
|   |   |                          |   |           |  |

Medical information
Please use this section to inform us if your child has any medical condition of which we need to be aware. All information will be treated as strictly confidential although centre staff will be informed.
PLEASE INFORM US IMMEDIATELY IF A MEDICAL CONDITION DEVELOPS DURING THE YEAR.

Medical Conditions: Likely Symptoms: Medication Carried: Action to be taken:

#### Permission for Photographs/Media

We would like to be able to take photographs of the ensembles during rehearsals and performances for use in promotional material, in programmes and on the website. Under current legislation we require parental permission for this. We would be grateful if you could supply this by signing the declaration below.

I give permission for my child to be included in photographs and videos of the ensembles run by the Dark Peak Music Trust.

I understand that photographs and videos of my child may appear in the press, on promotional literature and programmes and on the orchestra website. No child shall be identifiable by name unless separate permission is granted.

Please put a cross in this box only if you DO NOT want your child to be included in pictures

<u>Subscriptions</u> – Please put a circle around the payment option you wish to use:

NOTES:

- 1. Players joining part way through a year will be entitled to a reduction in the subscriptions on a pro-rata basis.
- 2. Where a family has three or more children in the music centre, the one in the lowest costing group will go free.
- 3. We can offer subsidised or free places in cases where financial hardship would make it impossible for a child to take part. If you would like us to consider this concession, please speak to your Ensemble Director or email admin@darkpeakmusic.co.uk.

|  | 1 payment in September | 2 installments -<br>To be paid in September<br>and January |
|--|------------------------|--|
| Senior Membership  Concert Band Senior and Intermediate Strings/Youth Orchestra  | £135                   | 2 x £67.50   |
| Junior Membership  • All Junior Ensembles ie. Glossop and Chinley Junior Wind Bands, Intermediate Wind Band, Junior Strings, Supertonics | £105                   | 2 x £52.50   |

#### **Payment**

We request that all members pay subs by direct transfer, although it is extremely important that we also receive this completed enrolment form for registration and safeguarding purposes.

Please use the following bank details and be sure to identify your payment as below:

Bank Sort Code: 01 03 38 Account Number: 29262275

In order that we can identify your payment please enter the following reference: **Initial and surname** of child followed by the **initials of the band** you are in (ie. one of the following DPCB, DPIWB, GJWB, CJWB, GJS, GIS, GSS or SUPTONICS)

eg. F SHARP DPCB

Cheques should be made payable to "DARK PEAK MUSIC FOUNDATION" NB. PLEASE WRITE THE NAME OF YOUR CHILD ON THE BACK OF THE CHEQUE

### **Data Protection**

All personal data provided on this form will be stored and processed in accordance with the Dark Peak Music Foundation's Privacy Policy which can be found on www.darkpeakmusic.co.uk under "Documents".

# 1. Declaration - please sign here

I confirm that I wish to enroll as a member of Dark Peak Music Foundation and would like my son/daughter to take part in the Music Centre Ensembles.

- I undertake to pay the appropriate subscription fees and confirm that the information provided above is correct.
- I agree to abide by all Covid-19 safety measures and to notify DPMF if anyone in your child's family or close contacts test positive.
- I have read the privacy policy of the Foundation and agree to the data protection and photograph/media permission declarations.

| Signed                 | Print Name | Date |
|------------------------|------------|------|
| 2. Gift Aid – please s |            |      |

Dark Peak Music Foundation is a registered charity and as such we are able to claim an additional 25p for every £1 of your subscription. Please sign here to confirm that you are a UK Tax Payer and that you would like your subscription to be treated as a Gift Aid donation.

| r confirm that ram a OK raxpayer and would like my | y payment to be treated as a Girt Aid Donation |       |
|--|--|-------|
| Signed   | Print Name                                     | .Date |