Valley Music Festival Sponsorship Award – Application for funding 2022

Please email this form to valleyfestival.s36@gmail.com or
post to 75 Haywood Lane Deepcar S36 2QF

Personal details

Name		Date of Birth	
Home Address			
School			
Email address			
Telephone Mobile		**Telephone landline**	
Parent/Carer's Name			
Parent/Carer's address and contact details (*if different from above)*			

Musical experience

What do you play or sing		Exam Grade (If Applicable)		
Teacher **Name and address and telephone number**				
Do you play another instrument or sing		**Exam Grade**		
Teacher **Name and address and telephone number**				
	Do you have access to an instrument for practice and performance YES/NO			

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PERSONAL STATEMENT
A chance for the young person to say why they love music and their music lessons.

(Please continue on another sheet if necessary)

PARENTAL / CARER SUPPORT STATEMENT
Our priority is to help young people access opportunities that might not be available to them.
How will our support help you / your child's musical studies.

(Please continue on another sheet if necessary)

TEACHER REFERENCE

We need to know that you are going to make good use of our award and further your musical studies.
Please ask your instrumental / vocal teacher or school teacher to give you a reference
(Please continue on another sheet if necessary)

Signed (Teacher)   *Name*   *Date*

DECLARATION

- I /We agree to support our child in their musical education and to ensure that they attend lessons and practice.
- We also agree to teacher progress reports being made available to the Valley Music Festival Committee for monitoring purposes.
- I/We also understand that funds are limited and that not all applications can supported.

If successful
- I/We also **agree/disagree** (*delete as appropriate*) to our child being included in publicity (Including Photographic /Video Images) in relation to the Valley Music Festival and the Dransfield Foundation.

Signed by Parent Carer   **Date**

Signed by Applicant (If aged 11 or over)   **Date**

RECEIVED BY VMF   **Date**