## SALISBURY DIOCESAN CHORAL FESTIVAL GROUP

## DEAN'S AWARD TO CHORISTERS ENTRY FORM

CANDIDATE'S NAME			
VOICE PARTTreble/Soprano/Alto/Tenor/Bass	/Unison singer (ple	ease delete as	appropriate)
ENTERED BY			
Age group: (date of birth if under 25)://	25-45	46-60	over 60
CHOIR			
POSITION IN CHOIR		•••	
DATE JOINED CHOIR			
PREVIOUS CHOIR (Give name of choir and date of e	ntry if less than 2 y	ears in presen	t choir)
	•••••		
Music to be performed:Hymn			
	nglican / Plainsong / ease delete as appi		esponsorial / Song
Own Choice I			
Own Choice 2			
Selected Festival for Section E			
Has the candidate attended an RSCM or other training If so, please give details:	g course? YES/NO	)	
Does the candidate have any special needs that the ex	aminer's and organ	isers should b	e aware of?
NAME & ADDRESS FOR CORRESPONDENCE (This should normally be the Choir Trainer)			
	•••••		
POSTCODEPHONE .	•••••		
F1			

The testimonial from the choir trainer should be scanned or inserted here:

The testimonial from the Parish Priest, Head Teacher or other responsible person should be sca	nned or
inserted here:	