**IBACUS HARP TEACHERS’ CONFERENCE**

***(****PLEASE USE CAPITAL LETTERS)*

Name of Applicant: Preferred Pronoun:

Full Postal Address:

Home tel: Mobile tel:

Email:

Number of years as a teacher:

Age range that you teach:
Primary / Secondary / Higher Education / Adults
*Please circle all that apply to you*

Levels at which you teach:
Beginners (< Grade 4) / Intermediate (Grade 4-7) / Advanced (Grade 8 +)
*Please circle all that apply to you*

Areas of particular interest to me are:

Dietary requirements/Allergies:

How did you hear about the course?
Internet / Teacher / Flyer / Previous Participant / Other (please specify)

*Please indicate your choice of accommodation: (all rooms ensuite)*
Residential shared accommodation (2 persons) and all meals except Saturday evening at the local pub £310
Residential with single room supplement and all meals except Saturday evening at the local pub £365
Non-residential, inclusive of all meals and snacks, except breakfast and Saturday evening at the local pub £270

I enclose *(please indicate)*EITHER Payment in Full OR Deposit £100.00 (non-refundable)

Please make cheques payable to Charlotte Seale, and post to 33 Sandbrook Road, London N16 0SH. Applicants who wish to pay by electronic transfer, please email **info@ibacusharpcourse.com**

Signed: Date: