

Application Form
A.O.T.O.S. Teacher training course
25TH – 30TH August 2008

Name.....

Address.....

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Post Code.....

Tel number.....

Mobile.....

Email.....

Do you have any dietary needs? Please specify.

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Please enclose a brief summary of your training, singing/teaching cv. And why you want to do this course now.

Where do you teach now?.....

How many pupils?.....

Age range.....

Usual repertoire.....

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Areas of knowledge, repertoire you would like to develop further.....

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Are you happy to play for pupils?