**The Woking Young Musicians Trust**

(Formerly the Marie Oswald Memorial Fund)

Registered Charity No. 283981

**APPLICATION FORM 2024**

##  Please PRINT clearly

|  |  |
| --- | --- |
| NAME |  |
| ADDRESS |  |
|  |
|  |
|  | Postcode |
| HOME TELEPHONE NO. |  |
| MOBILE NO. |  |
| EMAIL ADDRESS |  |
|  |
| DATE OF BIRTH |  |
| AGE at 31st December 2023 |  Years Months |
|  |
| SCHOOL(S) ATTENDED |  | Dates |
|  | Dates |
|  |
| INSTRUMENT(S)/VOICE/COMPOSITION |  | Teacher | Grade Achieved |
| 1 |  |  |
| 2 |  |  |
| 3 |  |  |
| **INSTRUMENT/VOICE to be heard at the audition** |  |
| **It is expected that the applicant will provide their own accompanist if one is required.**An accompanist can be recommended, but the responsibility remains with the applicant to organise rehearsal, make arrangements for the audition and pay for the accompanist’s services. |
| **Please note that a signature or an authorising email from the applicant’s music teacher or Head of Music is required. The applicant may, if they wish, submit with the application form a letter of recommendation from the authorising musician.** |
| **Please state here how you heard about the Woking Young Musicians Trust:** |

#### Please turn over

##### FURTHER INFORMATION ABOUT YOU AND YOUR INTERESTS

***Please write concisely, but include as much detail as you can.***

|  |  |
| --- | --- |
| MUSICAL EDUCATIONFor example where you are studying. |  |
|  |
|  |
|  |
| INVOLVEMENT IN MUSICAL ACTIVITIESFor example orchestras, bands, choirs, etc. |  |
|  |
|  |
|  |
| MUSICAL AMBITIONS |  |
|  |
|  |
|  |
|  |
|  |
| TO WHAT USE WOULD YOU PUT ANY GRANT AWARDED? |  |
|  |
|  |
| PLEASE GIVE DETAILS OF ANY OTHER GRANTS RECEIVED OR APPLIED FOR |  |
|  |
|  |
| WHERE DID YOU LEARN ABOUT THE AWARDS |  |

###### Applicant’s signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

###### Email address and signature of instrumental/vocal teacher or school Head of Music:

###### \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_

 Name and signature of parent/guardian required for applicants under 18 years old.

###### \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_

***Please return this form not later than FRIDAY 22nd FEBRUARY 2024 by email (in which case a typed applicant signature is acceptable) to*** ***wokingyoungmusicianstrust@gmail.com*** ***or by post to* Woking Young Musicians Trust, Wyke Cottage, Guildford Road, Normandy, Guildford, Surrey, GU3 2AN.**

***It is regretted that applications received after this date cannot be accepted.***

Those applicants selected will be notified soon after the closing date of the time of their audition and interview during the evening of Friday 22nd March 2024 at St. Peter’s Church, Old Woking