

## Primary Schools Expression of Interest

School Name: \_\_\_\_\_

Name and Position of Contact Person: \_\_\_\_\_

Address of School: \_\_\_\_\_

\_\_\_\_\_

Phone/Mobile: \_\_\_\_\_ Email: \_\_\_\_\_

Please tick which programme you are interested in having in your school:

- Early Years Primary
- Ready Steady Play Specify Instrument: \_\_\_\_\_
- Ready Steady Sing

Which classes would you like to take part in a MGSD music programme?

\_\_\_\_\_

\_\_\_\_\_

Please give detail of other music activity currently happening in your school eg. Afterschool Ukulele, 6<sup>th</sup> Class Choir at lunchtime etc.

\_\_\_\_\_

\_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_