

Masters International 'Primary Schools' Music Games[®]

RESPONSIBLE PERSON APPLICATION FORM

School Name: _____

APRA / AMCOS Licence No. _____

Responsible Person & Position (Main Contact)

Contact Details:

Mobile: _____ Tel /Fax _____

Email: _____

Supervision: *Teachers, Education Support, Volunteers (must have WWCC)*

E.g. Name and Position Mary Watt, Volunteer (WWCC, Accompanist)

NO.	NAME	POSITION
1		
2		
3		
4		
5		
6		
7		
8		