

Workshop Booking Form

Contact Details

Name of contact

Position

Name of organisation/school/music service

Address

Telephone

Fax

Mobile

Email

Workshop Requirements

Name of presenter

Focus of workshop
ie. instrumental performance, composition

Expected number of participants

Type of participants
ie. peripatetic/classroom teachers, students, children, amateurs

Duration required please tick 1 hour Half day Full day

Possible workshop dates 1st choice 2nd choice

Venue address

Additional Information

Would you like us to provide music for sale? please tick Yes* No

Can the venue provide the required facilities? please tick Yes No
If no, which additional facilities are required?

Any additional comments?

* This service may not be available in all areas

Please send the completed form to: **Marketing Department, Schott Music Ltd, 48 Great Marlborough Street, London W1F 7BB. Fax: +44 (0) 20 7534 0749**