

YOUNG IRISH JAZZ MUSICIAN ENTRY FORM

Please fill in this form carefully and return it to us - by email - along with your proof of age and video by February 28th 2022.

Attach your photo here

| First Name | Surname Family name | |
|--|---|----------------|
| Instrument | Date of Birth | |
| Home Address | | |
| | Ei | rcode/Postcode |
| Email | Mobile No. | |
| Parent/ Guardian Name (under 18 only) | Parent/ Guardian email (only under 1 | 8) |
| School/ College/ University Name | School/ College/ University Location | |
| Term time address (if different) | | |
| | Ei | rcode/Postcode |
| Weekend music school/ jazz band or other jazz ensemble | | |
| Interests | | |
| Where did you hear about our event? | | |
| | us know how we your application | |

Please fill in the boxes below to let us know what you're playing on your video:

| Name of Piece | Composer |
|---------------|----------|
| | |
| | |
| | |
| | |

I agree to take part in Limerick Jazz Young Musician 2022 and abide by its rules

I consent to the recording of my contribution subject to the rules, terms and conditions, which I have read

| Yes |
|-----|
| Yes |

| Your Signature | | Parent/ Legal Guardian Signature (under 18 only) | |
|----------------|--|--|--|
| | | | |
| | | | |

Email: yjm@limerickjazz.com

You can find our rules, terms and conditions on our website: limerickjazz.com/youngirishjazzmusician