



YOUNG IRISH JAZZ MUSICIAN 2024

# ENTRY FORM

Attach your photo here

Please fill in this form carefully and return it to us - by email - along with your proof of age and video by Monday, October 14th, 2024.

<b>First Name</b>		<b>Surname Family name</b>	
<b>Instrument</b>		<b>Date of Birth</b>	
<b>Home Address</b>			<b>Eircode/Postcode</b>
<b>Email</b>		<b>Mobile No.</b>	
<b>Parent/ Guardian Name (under 18 only)</b>		<b>Parent/ Guardian email (only under 18)</b>	
<b>School/ College/ University Name</b>		<b>School/ College/ University Location</b>	
<b>Term time address (if different)</b>			<b>Eircode/Postcode</b>
<b>Weekend music school/ jazz band or other jazz ensemble</b>			
<b>Interests</b>			
<b>Where did you hear about our event?</b>			

Do you have a disability or health issue, including mental health

No

Yes

If yes please let us know how we can help you in 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 2024 and abide by its rules

Yes

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

Yes

Your Signature

Parent/ Legal Guardian Signature (under 18 only)

Email: [yjm@limerickjazz.com](mailto:yjm@limerickjazz.com)

You can find our rules, terms and conditions on our website: [limerickjazz.com/youngirishjazzmusician](http://limerickjazz.com/youngirishjazzmusician)