

BOOKING FORM



MUSIC IN HOSPITALS

Creating joy through live music

Please complete and return this form if you would like us to arrange a concert for you.

If you need further information, please telephone the office on **01932 260810**. Alternatively email us at **info@music-in-hospitals.org.uk**.

England, Wales, Northern Ireland and the Channel Islands
Chief Executive: Diana Greenman

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Tel: 01932 260810 Fax: 01932 224123
E-mail: info@music-in-hospitals.org.uk
Website: www.music-in-hospitals.org.uk

Name of hospital/care home/hospice/day centre/school:

Address:

Postcode: _____ Tel: _____

Contact name / title _____

Preferred days (please indicate):

Preferred times:

Mon Tues Wed Thurs Fri Sat Sun am pm evening Time: _____

Suggested Dates:

Possible Venue: e.g. Day Room, Chapel, Lounge, Hall, Ward

Other: _____

Piano / keyboard / neither* available to the performers * please circle as appropriate

Please give any further details that you feel would be of help to us in arranging your concert (E.g. client group, age, type of music preferred):
