



Supported by:

## Recorder Masterclass with Daniël Brügger & Bertho Driever

- Where** Tunbridge Wells Girls' Grammar School, Southfield Road, Tunbridge Wells, TN4 9UJ
- When** **Saturday, 20 February 2010 2 – 5 pm**
- Parking** Available on the school site. Please **observe** the **one way system** when **leaving the school**.
- Cost** **£5** per entry (i.e. a group can enter for £5 too). Your cheque will not be cashed if we are unable to offer you a place to perform in the Masterclass. Audience free.
- How to book** Please complete **one form** for **each entry**, make **cheques** payable to **GRMC** and **send** with the completed **booking form(s)** as soon as possible to:

Amanda Smith, 25 Prospect Park, Southborough, Tunbridge Wells, Kent, TN4 0EQ

**Queries** Ring Amanda on **01892 534 525** or **email** via the **contact form** at **www.prospectmusic.co.uk**

**Please bring** A spare copy of the music, if possible, and people to listen (no charge).

### Optional extras!

- **The Early Music Shop** will have **instruments** and **music available on the day** – allow extra time to browse.
- **Refreshments** will be **available** to **purchase** at **TWGGS**.
- **3 pm Sunday 21 February 2010** at **The Spa Hotel**, Mount Ephraim, **Tunbridge Wells**, Kent, TN4 8XJ  
**Concert** given by the **Amsterdam Loeki Stardust Quartet**

A rare opportunity to hear this amazing recorder quartet in the UK.

**To avoid disappointment, you are advised to book tickets in advance.**

**Tickets: £20** (£10 full time students 16 & above). **Subject to space**, one under 16 admitted **free** with an adult paying full price. (We expect this concert to sell out)

**Book tickets online** at **www.greenroommusic.org** or **phone** 0845 680 1926 (Mon – Fri 9 – 4, Sat 10 – 1)

**We are grateful for the support received from The Early Music Shop for the Masterclass.**



**RECORDER MASTERCLASS BOOKING FORM**

NAME.....

ADDRESS (inc postcode).....

.....

HOME TEL NO..... Mobile.....

EMAIL.....

Where did you hear about this event? .....

Approximate standard.....

Recorder Teacher.....

Teacher's email/phone number (we may contact them for a reference).....

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Full title of work inc movt. you would like to play.....

.....

Please give an exact timing of this piece.....

Do you require a piano or harpsichord (it may only be possible to offer a Clavinova for harpsichord).....

Do you require an accompanist (at an extra cost)?.....

Please **give details** of any **medical information** we should know about (continue overleaf).....

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**We hope that parents will stay to listen to the masterclass but please complete the following information for all students under 18:**

In the event of an emergency, my contact details during this event are.....

.....

**PARENT'S MEDICAL CONSENT FORM**

**Child's full name:** .....

**Date of birth:** .....**Age of child**.....

I understand that in the event of an accident or injury to my child, the organisers will make every effort to contact his/her parent(s) / guardian(s). Where this proves to be impossible, I give my permission for any emergency medical treatment, including anaesthetic, to be administered.

Signed: (Parent / Guardian) \_\_\_\_\_

Print Name (Parent/Guardian)\_\_\_\_\_

Date: \_\_\_\_\_

Name of Doctor: \_\_\_\_\_ Tel. No.: \_\_\_\_\_