**YORKSHIRE BRASS BAND CHAMPIONSHIPS - 2024**

**KIRKLEES FIRE REGULATIONS - PARENTS/CHAPERONES REGISTER**

NAME OF BAND\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NAME & ADDRESS OF SECRETARY \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| THESE COLUMNS MUST BE COMPLETED IN BLOCK CAPITALS  **PARENTS AND BAND CHAPERONES ACCOMPANYING BAND PLAYERS 16 AND UNDER** | | | |
|  | **Members**  **16 years**  **& under**  **Initials** | **NAME OF PARENT/CHAPERONE**  **Surname & Initials Only** | **ADDRESS OF PARENT/CHAPERONE**  **The complete Postal Address of each person must be inserted.** |
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I, the undersigned, declare that the above particulars are true to the best of my knowledge and belief

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Secretary. Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**THIS FORM IS A MANDATORY REQUIREMENT**

**AND MUST BE HANDED IN AT THE DRAW FOR YOUR SECTION.**