

# Musical Journey to the Land of Your Dreams - Registration Form

Please fill in the form below to sign up your class or educational bubble to take part in BlueJam's Musical Journey to the Land of Your Dreams. After we receive your form we will send you all the resources you need for your class to take part in the project, as well as contacting you to arrange a schedule. We're looking forward to working with you!

You can find more information about the project here:

<http://www.bluejamarts.org/musical-journey-to-the-land-of-your-dreams/>

Questions? E-mail [admin@bluejamarts.org](mailto:admin@bluejamarts.org).

Thank you!

**\*\*This project is supported by Cumbria Music Hub\*\***

**\* Required**

1. Name of School \*

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2. Address of School, including postcode \*

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3. Lead Teacher's Full Name \*

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4. Lead Teacher's E-mail Address \*

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5. Lead Teacher's Phone Number \*

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6. How many classes would you like to be involved in the project? \*

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7. Which year group(s) are these classes? \*

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8. What days/times would your class be available for a workshop (these can be rough but it just gives us an idea) - please select all that apply \*

*Check all that apply.*

	Morning	Afternoon	Not available
Monday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tuesday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Wednesday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Thursday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Friday	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

9. Do you have a class topic that you'd like us to include in our work with your class(es)? Please tell us below \*

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10. Are you able to pay £100 to take part in the project? \*

*Mark only one oval.*

Yes, that's fine

Not sure - can we have a chat?

Other: \_\_\_\_\_

11. Do you have any other comments, 'need to knows' or questions? Let us know below. \*

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