



Quarry Bank
Musical Theatre
Society



'FRIENDS' OF QBMTS REGISTRATION FORM

The Sound of Music 2014

Please accept this form as confirmation of my desire to become a 'FRIEND' of QBMTS for their production of **The Sound of Music** June 2014.

Name:

Address:

Contact Telephone No:

Name:

Address:

Contact Telephone No:

Name:

Address:

Contact Telephone No:

Name:

Address:

Contact Telephone No:

Total Money enclosed: £.....

Please make all cheques payable to QBMTS and return this form and any payment to:

Mrs Rachel Homer, 33 John Corbett Drive, Amblecote, Stourbridge. DY8 4BJ

If you require further details to be added please use the back of this form.

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