# Latha-ciùil, Disathairne 4 den Mhàrt 2017
# Music Day, Saturday 4th March 2017

## 1. Fiosrachadh conaltraidh | Contact Information

**Thèid gach pìos fiosrachaidh a chumail dìomhair** | All information will be treated in the strictest of confidence

**Ainm pàrant / neach-dìona |** Name of parent / guardian: .....

**Seòladh puist |** Address: .....

.....

**Àireamh-fòin |** Phone number: .....

**Seòladh puist-d |** Email address: .....

**Am bu thoil leibh naidheachd fhaighinn air Fèis Chataibh tro phost-d? |** Would you like to be included on Fèis Chataibh's emailing list?

**Bu thoil / Cha bu thoil**
Yes / No

## 2. Cuspairean | Choices

Each participant chooses two subjects from:

| | | | | |
|---|---|---|---|---|
| Fiddle | Guitar | Tin whistle | Keyboard | percussion |
| Accordion | Gaelic song | Chanter &Pipes | clarsach | |

Please fill in the following for each child in your family taking part:

| **Ainm a' chompàirtiche** Participant name | **Latha breith** Date of birth | **Roghainn a 1** Choice 1 | **Eòlas*** Level* | **Roghainn a 2** Choice 2 | **Eòlas** Level | **Gàidhlig agad?** Do you speak Gaelic? |
|---|---|---|---|---|---|---|
| | | | | | | |
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***Thoiribh an aire |** Please note: *

**Tha an tachartas seo fosgailte dha compàirtichean aig ìre sam bith a chomas ach bhiodh cuideachail nan innseadh tu dhuinn dè an ìre aig a bheil thug us an cuir sinn thus a chlas iomhchaidh (faicibh gu h-ìosal)**
This event is aimed at young musicians of any musical ability. However is would be helpful if you could tell us your level so we place you in an appropriate class (please see below).

- **Level 1** = beginner: has never played the instrument or sang before and would like to learn the basics
- **Level 2** = improver: has played a little before & can play a simple tune
- **Level 3 =** intermediate: can play/accompany/sing three or more pieces at a steady pace with good tuning & some ornamentation
- **Level 4** = advanced: can play/accompany a range of tune types (march, strathspey, reel, jig etc) at steady dancing pace with consistent tuning and clear ornamentation; can sing a range of Gaelic songs

**Feumach air ionnsramaid? Innse dhuinn |** Need a loan of an instrument? Please tell us here:

.....

# 3. Fiosrachadh èiginn | Emergency Information

**Ainm agus àireamh-fòin far a bheil pàrant, neach-dìona, no cuideigin eile a th' air ainmeachadh a bhios ri fhaighinn fhad 's a tha am pròiseact a' dol.**
Name and telephone number where parent, guardian or nominated contact can be contacted during project events:

**Ciad neach |** Main contact:

**Ainm & dàimh |**
Name & relationship: .....

**Àireamh-fòin |**
Phone number: .....

**Dàrna neach |** Second Contact:

**Ainm & dàimh|**
Name & relationship: .....

**Àireamh-fòin |**
Phone number: .....

**Fiosrachadh mu chùisean meidigeach a tha feumach air aire riaghailteach no cùram a bharrachd |**
Please give details of any medical condition(s) that require regular attention or special precautions:

**Feumlachdan-taic a bharrachd sam bith a th' aig a' chòm-pàirtiche gus an tèid againn ullachaidhean freagarrach a dhèanamh gus am bi deagh latha aige / aice** |
Please give details of any additional support needs your child may have so that we can ensure he or she has a good experience at the fèis:

# 4. Cead – cuiribh sràc | Consent – please tick

**Tha mi a' tuigsinn nàdar an tachartais is a' measadh gun tèid aig mo phàisde / clann pàirt a ghabhail|**
I understand the nature of activities and consider my child(ren) fit to take part: ☐

**Tron phròiseact togar dealbhan is bhideothan, a bheil sibh toirt cead dhuinn airson seo? |**
I give consent for my child(ren) to appear in photographs and videos to be taken for publicity purposes. ☐

**Tha mi a' toirt cead airson cobhair medigeach dham phàiste / dhan chloinn agam ann an cùis-èiginn |**
I give permission for medical treatment for my child(ren) in the event of emergency: ☐

**CHAN EIL mi a' toirt cead airson cobhair medigeach ann an cùis-èiginn |**
I DO NOT give permission for medical treatment for my child(ren) in the event of emergency: ☐

**A bheil dad a dh' fhiosrachadh eile a' buntainn ri ur pàisde/clann a bu chòir a bhith againn? |**
Is there any other information about your child(ren) which we should know?

**Ainm-sgrìobhte** | Signature: .....

**Ceann-latha |** Date: .....

**Tillibh foirmichean gu |** Please return your form to:
Debbie Celli, 66 Tower Street, Golspie / feischataibh@yahoo.co.uk / 07731 761 982
*Places are awarded on a first come first served basis*