

5th International V - Accordion Challenge

PLEASE PRINT OR USE BLOCK CAPITALS

YOUR DETAILS

Name _____ Date of Birth _____

Address _____

Postcode _____

Email _____ Telephone _____

YOUR ENTRY

Are you using a Roland V-Accordion? _____

Are you entering the senior or junior category? _____ Name of Piece _____

How did you hear about the competition? _____

ACCEPTANCE

I have read and accept the competition regulations. I declare that the person/s playing on the recording is/are the person/s named above. I understand that the recording cannot be returned.

Signed _____

Date _____

This form and evidence must be returned by February 28th to 5th V Accordion Challenge, Roland UK,
Atlantic Close, Swansea Enterprise park, Swansea, SA7 9FJ or in an e-mail to dean.lawrence@roland.co.uk