

Breathe Magic... The Next Stage

Expression of Interest form

Thank you for your interest in attending Breathe Magic...The Next Stage. Please complete and return this form to confirm your interest in reserving a place for your child on the programme in 2017 or 2018. Please contact us if you require any more assistance or information, or would like to receive this form in a different format.

Personal information

Young magician's name		
Address		
Email address		
Telephone number		
Please state your County or London Borough		
Date and location of previous Breathe Magic camp attendance		

Availability and funding

Please tick as appropriate

1. We are interested in attending <i>Breathe Magic...The Next Stage</i> in October 2017 (24-28 th)	
2. If confirmed, we would be interested in attending the <i>Breathe Magic...The Next Stage</i> in February 2018 half term (dates TBC)	
3. We would be interested in attending parent focus groups to support the development of future Breathe Magic programmes	



Breathe Arts Health Research
 6 St Georges Circus
 The Clarence Centre for Enterprise
 & Innovation, London SE1 6FE
 t. +44 (0)203 290 2013
 e. info@breatheahr.org
www.breatheahr.org

4. We would be interested in our child attending a young magician's focus group to help support the development of future Breathe Magic programmes	
5. Please indicate whether you would be able to self-fund or would seek alternative funding sources. The programme costs £1,200.	
6. We plan on fundraising towards the cost of attending the programme, and would like to receive the fundraising information pack	

Further information

Date completed		Completed by			
Would you like to be kept up-dated about Breathe activities?	Yes please		No thanks		

Thank you for taking the time to complete this form. Please return the completed form to magic@breatheahr.org or post it to:

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