



british music experience

EDUCATORS PASS* TO THE BRITISH MUSIC EXPERIENCE

Name:

Email:

School/
Institution:

Postcode:

Subject: (please tick)

- | | | | | | |
|-----------|--------------------------|-------------|--------------------------|--------|--------------------------|
| Art | <input type="checkbox"/> | Citizenship | <input type="checkbox"/> | Design | <input type="checkbox"/> |
| Geography | <input type="checkbox"/> | History | <input type="checkbox"/> | ICT | <input type="checkbox"/> |
| English | <input type="checkbox"/> | Math | <input type="checkbox"/> | Music | <input type="checkbox"/> |
| PSHEE | <input type="checkbox"/> | Science | <input type="checkbox"/> | | |

Class Age: (Please tick)

- 7 to 11 12 to 14 14 to 16
16 to 19 19+

Please present this completed pass at the British Music Experience box office along with ID linking you to your school or institution.

***Valid for ONE free ticket for the British Music Experience**
Terms and conditions apply.

Tick the box to opt out of BME promotions

Tick the box to opt out of third party promotions