

**Sound Production Courses**  
**Registration of Interest**

*Which course are you interested in?*

Electronic Music Production:

Mixing with the Masters:

Pro Tools Short Courses:

First Name:

Last Name:

Date of Birth:

Phone Number:

Address:

Email:

USI:

Please note: This is not your enrolment form for the course.  
This is a registration of interest and someone will contact you shortly to discuss.

***Please print and complete this form.***  
***Send to: [learn@thegrovestudios.com](mailto:learn@thegrovestudios.com)***