



Village Music Circles Certified™
Drum Circle Facilitator

Application Form

Name _____ Age _____ Gender _____

Name as you would like it to appear on your Certificate (if different than above)

Home address _____

City _____ State _____ Zip/Postal code _____

Business name _____

Office address _____

City _____ State _____ Zip/Postal code _____

Phone (home) _____ Work _____

Email _____ fax _____

Send or email typed application form to:

Village Music Circles™
719 Swift St. #65 Santa Cruz, Ca 95060
831.458.1946 ph
831.459.7215 fx



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outreach@drumcircle.com

Present Occupation:

Professional Certifications:

Professional Experience:

Leadership Experience:

Rhythm Event Facilitation Experience: List types of populations eg. school kids, kids at risk, special needs, community drum circles, corporate events, etc. Note the percentage work you do for the above categories that you listed above totaling 100%.





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Previous study of other facilitating methods: Include name of program & date

What portion of your work is dedicated to drumming, hand drum teaching or facilitating Rhythm based events? ___ full time ___ part time ___ occasional

Please elaborate:

List specific VMC Drum Circle programs you've participated in as a student and/or mentor:
Include location and year.



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Drumming experience: include drum teachers and hand drumming programs:

Performance experience: include theater, mime, music etc.

Other information relevant to your experience:

Date of Application _____ Signed _____



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