

Application Form.

Surname \_\_\_\_\_

Child's name (please underline the name used) \_\_\_\_\_

Date of birth \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

Telephone \_\_\_\_\_

Mobile \_\_\_\_\_

E – mail \_\_\_\_\_

School Attended \_\_\_\_\_

School Attended (as of September 2005) \_\_\_\_\_

	<b>Emergency Contact 1</b>	<b>Emergency Contact 2</b>
Name		
Relationship to child		
Telephone number		
Mobile number		

**Declaration of parent:**

I would be interested in my daughter/son to taking part in the 'LTD' summer workshop/after school club\*

Signed \_\_\_\_\_ Date \_\_\_\_\_

\* Delete if necessary

**PLEASE USE THE SPACE BELOW TO GIVE DETAILS OF ANY  
PREVIOUS ACTING/DRAMA EXPERIENCE YOUR CHILD HAS HAD:**

