

# **T**hespis Performing Arts Company

ALL DRAMA CLUBS TAKE PLACE AT:  
ABBOTTS ANN WAR MEMORIAL HALL  
DUCK STREET  
ABBOTTS ANN  
SP11 7AZ

**Please fill out all the sections below:**

**The questions with an \* means that they question requires an answer. Please fill out in Block Capitals.**

\*Child's Name: \_\_\_\_\_ \*Age: \_\_\_\_\_

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Child's Name: \_\_\_\_\_ \*Age: \_\_\_\_\_

\*1<sup>st</sup> Line of Address: \_\_\_\_\_

2<sup>nd</sup> Line of Address: \_\_\_\_\_

\*Town: \_\_\_\_\_

County: \_\_\_\_\_

\*Postcode: \_\_\_\_\_

\*Emergency Contact Telephone Number: \_\_\_\_\_

\*Relationship to Child/Children: \_\_\_\_\_

Emergency Contact Telephone Number: \_\_\_\_\_

Relationship to Child/Children: \_\_\_\_\_

Email Address (Used to send details of future clubs): \_\_\_\_\_

Medical Conditions: \_\_\_\_\_

Due to the Data Protection Act 1998, permission is required to be given for your child/children to be included in any pictures/video's that are taken over the course of the sessions. These pictures would be used to promote future events via the Internet as well as within the local area. Thespis has its own website [www.thespis.co.uk](http://www.thespis.co.uk) and Facebook page that images/videos will be featured on.

If you give permission for your child/children to be videoed and/or photographed for the purpose of souvenirs and any publicity for the Thespis Performing Arts Theatre Company please sign below. By signing below you are giving permission for all future drama clubs that your child/children will attend.

Sign: \_\_\_\_\_

Date: \_\_\_\_ - \_\_\_\_ - \_\_\_\_

**Declaration by Parent/Legal Guardian**

**Please Note: Cheques will no longer be accepted as a form of payment, sorry for any inconvenience caused.**

**I declare that the information in this application is correct and hereby apply for a place for my child/children. I understand that Thespis Performing Arts Company reserves the right to refuse admission at its own discretion.**

**Which method of payment will you be using? (Please delete as appropriate)  
Bank Transfer / Cash**

**If you choose to pay by bank transfer, for the reference please use the name of the drama club, followed by the year, for example 'Easter 2016.'**

**All course fees must be paid in full with your application.**

**I understand that in the event of my child/children not being accepted my payment will be returned to me forthwith.**

**\*Sign: \_\_\_\_\_ \*Name Printed: \_\_\_\_\_**

**\*Parent/Legal Guardian of: \_\_\_\_\_ \*Date: \_\_\_\_-\_\_\_\_-\_\_\_\_**

**Please return this application form and payment, made payable to 'Heather Blackmore' or 'Thespis Performing Arts Company' to:**

Mrs. Heather Blackmore  
River Lodge  
Goodworth Clatford  
Hampshire  
SP11 7RT

**Or you can email me the application form to:  
Heather@privatedramateacher.co.uk**

**Thank you.**