

# APPLICATION FORM 2023

Please complete in **BLOCK CAPITALS**.



## DESIRED WEEK OF ATTENDANCE

7<sup>th</sup> – 13<sup>th</sup> AUGUST

14<sup>th</sup> – 20<sup>th</sup> AUGUST

21<sup>st</sup> – 27<sup>th</sup> AUGUST

## PURCHASER / PARENT or GUARDIAN

Surname Forename Sex M / F

Address

County Postcode

Home Tel Mobile Tel

Relationship to Student Email

Is the purchaser the student parent or guardian? Yes / No

## STUDENT DETAILS

Surname Forename Sex M / F Pronouns

Address

County Postcode

Home Tel Mobile Tel

Date of Birth Email

Age (at time of course) Attended the summer school previously? Yes / No

## ALTERNATIVE EMERGENCY CONTACT (must be completed)

Surname Forename Sex M / F

Address

County Postcode

Home Tel Mobile Tel

Relationship to student

## HOW DID YOU HEAR ABOUT WEST END STAGE SUMMER SCHOOL? (please tick)

Friend/Family  Newspaper Ad  Google Search  Flyer/Leaflet

Theatre Programme  (which show/venue?) Other  (please explain)

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## PLEASE GIVE BRIEF DETAILS OF ANY ARTS TRAINING OR EXPERIENCE TO DATE

*(State any previous performance experience: school, amateur or professional experience)*

## MEDICAL CONDITIONS / CIRCUMSTANCES OF WHICH THE SCHOOL SHOULD BE AWARE?

Yes / No

Details and Medication:

*(Any medical information provided is used only for the purpose of ensuring that appropriate arrangements are made to enable a student to participate in classes without danger to their health, and, in the event of a medical emergency, to be provided to the emergency services.)*

## DOES THE STUDENT HAVE ANY SPECIAL DIETARY REQUIREMENTS?

Yes / No

Details:

## WILL THE STUDENT REQUIRE ONSITE ACCOMMODATION WITH US IN LONDON?

Yes / No

*(West End Stage is able to provide secure, supervised accommodation at an extra cost, details of which can be found on our website.)*

## IF NO, PLEASE CHOOSE ONE OF THE FOLLOWING:

Bring your own lunch

Lunch provided by West End Stage (additional cost: £30)

*(West End Stage is able to provide lunch at an extra cost, details of which can be found on our website.)*

## DECLARATION BY PARENT / GUARDIAN

I \_\_\_\_\_ being the Parent / Legal Guardian of

declare that the information given in this form is correct. I further agree to the Terms & Conditions as set out on the company website ([www.westendstage.com](http://www.westendstage.com))

I enclose **DEPOSIT £250 / FULL PAYMENT WITHOUT LUNCH (£645) / FULL PAYMENT WITH LUNCH (£675)/FULL PAYMENT WITH ACCOMMODATION (£1195)** (*please circle*) by cheque payable to **West End Stage**.

*Alternatively you can make a bank transfer to the below account using the **student name as reference**:*

*NatWest, Account Number: 27037223 Sort Code: 52-21-43*

*Please return this completed form to: **West End Stage, 49 Greek Street, London, W1D 4EG***

*Please note all outstanding balances must be settled by 1<sup>st</sup> June 2022.*

Signed

Date

*The personal data included in this form will be processed by West End Stage for the purpose of administration only.*

**WEST END STAGE, 49 GREEK STREET, LONDON, W1D 4EG**  
**www.westendstage.com info@westendstage.com +44 (0) 207 8367947**