

Phoenix Theatre Company



APPLICATION FOR MEMBERSHIP

Sex: Male Female
Title: Mr Mrs Miss Ms Other: _____
Forename: _____ Surname: _____

Date of Birth: _____

Address

House Number: _____
Street: _____
Locality: _____
Town / City: _____
Postcode: _____

 E-Mail: _____

 Telephone: _____

 Mobile: _____

Previous Experience

Acting Dancing Singing None

Annual Subscription – Payable on commencement of Membership (if accepted)

Performing Adult - £15.00 Performing Child - £10.00 Non-Performing - £10.00
(Under 16 or in Full Time Education)

Full cast rehearsals will be held on a Wednesday night with principal rehearsals being arranged accordingly with the production team.

I am willing to audition when required.

Agree

Any child under the age of 16 when joining the company will have to be given permission by a parent/ guardian allowing photographs and/or video film to be taken and used publicly from time to time. This material will only be used for promotional or marketing purposes however without this express consent membership acceptance cannot be allowed. By signing this form on behalf of a child you are giving this required permission.

**Phoenix Theatre Company have policies covering data and child protection.
Full details are available on our website under the 'Compliance' section.**

www.phoenixtheatreco.co.uk/compliance

Signature: _____
(Parent or Guardian must sign if under 16)