

Please give details of any youth theatres or drama groups you are involved in:

Please list any additional experience you feel is relevant to the course:

What other hobbies/interests do you enjoy?

Why do you want to be part of Summer Festival 2010?

PARENTAL PERMISSION

If you are under 18, we must have your parent/guardian's permission before we can offer you an audition for SF2010.

Name: _____

Address: _____

Phone No: _____

Signature: _____

REFEREE

Your referee should be an adult you know well, but are not related to (e.g. a teacher). Please check that they are willing to be contacted if necessary!

Name: _____

Address: _____

Phone No: _____

Email: _____

DECLARATION - ALL APPLICANTS MUST SIGN THE FOLLOWING DECLARATION

Please accept my application for SF2010. To the best of my knowledge, all of the above information is correct:

Signed _____ Date _____

Return this form to: Intermediate Course Applications, Scottish Youth Theatre @ The Old Sheriff Court, 105 Brunswick Street, Glasgow G1 1TF. Tel: 0141 5523988 Fax: 0141 5527615

CLOSING DATE FOR APPLICATIONS: 12TH FEBRUARY 2010

REMEMBER TO INCLUDE A PASSPORT PHOTO AND A CHEQUE/POSTAL ORDER FOR £10 TO COVER AUDITION/ADMINISTRATION COSTS