# lsda logo**BOOKING FORM**

**ACCESS TO ACTING - ACT 101**

**Please attach a recent photograph**

**DATES:** Please mark the start date you wish to book

Sunday 19th January 2020

Sunday 19th April 2020

July 2020 (date TBC)

Sunday 18th October 2020

**Personal Details**

Name:

Address:

Tel No:

Email:

Male/Female:

Date of Birth:

Nationality:

First Language:

**Previous Experience:** Please list all past or current activities which will support your application.

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**Other Skills: (e.g. musical/sporting etc)**

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**Reasons for wanting to attend course:**

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**How did you hear about us?**

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**Equal Opportunities Monitoring**

We are committed to widening access to our courses and so it is important to monitor who is applying to the school. The information you provide below will not be used in the selection process.

Please tick the statement that best describes your ethnic origin:

Asian/Asian British Bangladeshi

Asian/Asian British Indian

Asian/Asian British Pakistani

Asian/Asian British any other

Black/Black British African

Black/Black British Caribbean

Black/Black British any other

Chinese

Mixed White/Asian

Mixed White/Black African

Mixed White/Black Caribbean

Mixed, any other

White British

White Irish

White, any other

Not known/not provided

Any other:

Please tick any statement that best describes your status with regards to any disability, and provide more details in the box below, if appropriate:

Hearing Disability

Dyslexia / Dyspraxia

Visual Disability

Learning Disability

Physical Disability

None known

Other

|  |
| --- |
|  |

Please include all conditions and/or disorders that you are aware of, such as ADHD – this information is so that we can assess your application /audition fairly and will in no way negatively affect the application outcome.

Please email completed application form (including a photo of yourself) to [enquiries@lsda-acting.com](mailto:enquiries@lsda-acting.com)