# lsda logo**BOOKING FORM 2024**

**Summer Short Courses**

Please attach a recent photograph

[ ]  **Introduction to Drama School** *(2 weeks)*  22nd July – 2nd August 2024

[ ]  **Introduction to Drama School** *(2 weeks)*  12th – 23rd August 2024

[ ]  **Screen Acting** *(1 week)* 2nd – 6th September 2024

[ ] Audition Techniques*(1 week)* 9th – 13th September 2024

**PERSONAL DETAILS**

**Name:** Click or tap here to enter text.

**Address:** Click or tap here to enter text.

**Tel No:** Click or tap here to enter text.

**Email:** Click or tap here to enter text.

**Date of Birth:** Day: Choose a day. Month: Choose a month Year: Choose a year

**Nationality:** Click or tap here to enter text.

**First Language:** Click or tap here to enter text.

**Which of the following most accurately describe(s) you?** *Choose as many as you like.*

Female: [ ]  Male: [ ]  Non-Binary: [ ]  Transgender: [ ]  Intersex: [ ]

Let me type: [ ]  Click or tap here to enter text. I prefer not to say: [ ]

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

|  |
| --- |
|  |

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

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| --- |
|  |

**Reasons for wanting to attend course:**

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| --- |
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**How did you hear about us?**

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|  |

**Equal Opportunities Monitoring**

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

**Please tick the statement that best describes your ethnic origin:** Choose an item.

**Please tick any statement that best describes your status with regards to any disability:** Choose an item.

Provide more information if appropriate:

|  |
| --- |
|  |

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.

**I confirm that the information supplied is correct:**

**Signature**: Click or tap here to enter text. **Date**: Click or tap to enter a date.

*Type your name if you are emailing this form.*

Please email completed booking form to **admin@lsda-acting.com**