**ADULT ACTING COURSE 2017-2018**

**Application Form**

**First Name Surname**

**……………………………………………… ……………………………………………………………………………**

**Male Female**

**(*Please delete as appropriate*)**

**Address
……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………**

**Telephone …………………………………………………………………………………………………………………………**

**Email …………………………………………………………………………………………………………………………………**

**Date of Birth ……………………………………………………………………………………………………………………**

**I have read the Artists Theatre school rules and understand the commitment involved: all Saturday’s from September – July. I also understand I may be required for some Sunday rehearsals after Christmas.**

**I intend, if accepted to go through the whole year’s course.**

**I undertake to attend all classes punctually unless quite unavoidably prevented.**

**I undertake, if accepted to pay the appropriate fees of £250 per term.**

**Signed Date**

**..………………………………………… ………………………………………………………..**

**Please return to:**

**Freda at -** **artiststheatreschool@hotmail.com**

**OR to - Freda Gill, Administration, Artists Theatre School, 36 Shakespeare Road, London W7 1LR**

***Note: Please include a passport sized photograph/headshot with your application.
For the audition – please prepare two monologues: a Shakespeare and a contemporary to perform OFF SCRIPT. Please bring spare copies of the monologues with you.***