**Youth Companies Registration Form**

**Tick the project/s you wish to register for:**

🞎 Junior Youth Theatre (ages 11-15) 🞎 Youth Theatre (ages 16-20)

🞎 Young Actors Company (ages 16-25) 🞎 Monologue Slam (ages 11-17)

**YOUR DETAILS**

First name ……………………………………….. Last name……………………………………….

Address ……………………………………….……………………………..………………………...

Borough …………………………………………………City …………..

Post code ………….. Mobile No. ………………………………………..

Gender………………… Date of Birth ……………………… Age………………………

Email ……………………………………..…………………………………………………………..

Ethnicity ………………………………………………………………………………………………...

Place of Education/Work ……………………………………………..

Do you consider yourself disabled? ………………………………….

Do you have any access or learning requirements? …………………………………………………………………….………………………………………………………………………………………………..................

**PARENT/CARER DETAILS**

First name ……………………………………….. Last name……………………………………….

Address ……………………………………….……………………………..………………………...

Borough …………………………………………………City …………..

Post code ………….. Mobile No. ………………………………………..

Relationship …………………

Email ……………………………………..…………………………………………………………..

**Disciplinary procedures**

There are times when a participant’s behaviour or language may be disrespectful; this is

very rare. We would, in the first instance, speak to them and find a way of helping them to positively change. If, in particular, poor punctuality, poor attendance or disrespectful behaviour continues, we will ask them in writing to change positively. A copy will be sent to yourself. If it continues, then we will ask them to leave, which would also be communicated in writing.

**Data protection**

The applicant acknowledges that Pioneer Theatres Ltd (trading as Stratford East) holds and processes personal data about them for all purposes linked to their application. Pioneer Theatres Ltd owns and operates Theatre Royal Stratford East (TRSE) and is a data controller and processor as defined in the General Data Protection Regulations.

The personal information you provide here will be strictly controlled and managed by TRSE and used only for the purposes of providing the services you have requested from us, for the safety and security of you and / or your dependents during the program and anonymized reporting to internal stakeholders and our funders.

Personal data may be kept electronically or in hard copy format. Personal data may be disclosed or transferred to other employees and to other persons as may be reasonably necessary for the purposes of, or in connection with, our business and as otherwise required or permitted by law.

Full details of Pioneer Theatres’ Privacy Policy can be found here: <http://www.stratfordeast.com/privacy-policy/>

**PLEASE READ: IMPORTANT**

**Safety**

1.    I understand that the organisers of the activities will take all reasonable precautions for the care and safety of those taking part and of their property and will only be responsible for any injury or for the loss of personal property if this is caused by their negligence.

2.    I understand that should the participant need medical or surgical treatment, the organisers will make every effort to contact me before treatment is given. If, however, this is not possible, I agree that the organisers may arrange emergency advice and/or treatment.

3.    There will always be a member of staff that has been processed for an Enhanced DBS check (the old Police Check) in the working space.

**YOUR CONSENT**

If you are under 18: you MUST get your Parent/Carer/Guardian to read & sign this.

If you are 18 or over, please read & sign this yourself.

**Photographs**

May we photograph and film you at work with us?

* Yes
* No

May we share them with other companies that we work with?

* Yes
* No

**Consent for 18 and overs**

I, (your name) ………………………………………………………… agree to take part in Stratford East Youth Companies, as per the arrangements and my consent as set out above.

Date: ……………………………………………………..

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| **CONSENT: PLEASE SIGN**  I (your name)………………………………………………………………………………………………  Being the parent/guardian of ………………………………………….  hereby give permission for my son/daughter/ward to take part in Stratford East Youth Companies  Signed: …………………………………………… Date: ………………………………………  Relationship to applicant: ………………………………………………………………… |

To register your interests in any of our Youth Companies, please email a completed registration form with a headshot (can be taken on a phone) to Aliyah Forde, [aforde@stratfordeast.com](mailto:aforde@stratfordeast.com)