

SUMMER SCHOOL REGISTRATION FORM

15th-27th July 2019

Personal Details

Name

DOB Day/Month/Year

Age

Address

Post Code

Contact Information

Email

Phone Number

Emergency Names and Numbers

1 Name

Number

1 Relation to Child

2 Name

Number

2 Relation to Child

Equal Opportunities

The Alhambra Theatre is committed to promoting equality of opportunity. In order to provide the highest quality of experience for the course, please indicate areas where additional support could be offered.

Do you have a medical condition and or allergies we need to be aware of? Please Tick

YES |

NO |

If "YES" then please state the medical condition and or allergies

Fill out and return to

Alhambra Theatre

33-35 Canmore Street, Dunfermline, KY12 7NX
Mon-Fri 10am-5pm

T-Shirt Size

Children's Please Tick

Adult Please Tick

9-11 |

S |

12-13 |

M |

XS |

L |

XL |

Permission to be recorded

During the workshops we may need to take videos and photographs of each participant for publicity purposes. I/my child, agrees to be photographed/filmed during the Alhambra Theatre Summer School and hereby give all consents necessary for the reproduction and exhibition of any photographs/video taken without liability or acknowledgment to me/my child. The Alhambra Theatre shall be entitled to cut and edit the photographs/videos as we deem fit and to include all or any of the same in any publication.

Signed by applicant
(Parent or guardian if under 16 Years old)

[Sign Here](#)

Payment Details

Course Fee: £325

Non refundable deposit of £125.00

(Secures Place)

Deposits can be made in cash or by cheque, made payable to "Alhambra Theatre Trust"

*Deposits are non-refundable

Or payment can be made by
BACS transfer.

Sort code 82-62-19

Account Number 50394654.

Please ensure that you include a reference with your payment with your child's name and the words Summer School so we can identify the payment.

Questions

If you have any questions please contact:
01383 740 384

boxoffice@alhambradunfermline.com

ALHAMBRA