

FREE RANGE YOUTH THEATRE

In Association with Siamsa Tire, Town Park, Tralee, Co Kerry

Membership Application Form

Name: _____

Address: _____

Date of Birth: _____

Mobile Tel No: _____

Email: _____

Person to contact in case of emergency:

Name: _____

Mobile Tel No: _____

Landline No: _____

Relationship: _____

Please tell us of any medical conditions you feel we need to be advised of, or any special needs you may need facilitated.

** You must be over 15 years of age and under 20 years of age to join Free Range Youth Theatre.*

DECLARATION

The information you have provided on this form will be used to inform you of any further details about the workshop or any information pertinent to your application. We will not supply your information to third parties.

I agree for my information to be stored and used by Free Range Youth Theatre as stated above.

Signature _____