

ANTHOS ARTS CHAEMELEONS PROJECT -

'THE KNIGHTS OF THE ROUND TABLE' SUMMER TERM 2023

Applicant's Details				
Child's Name				
Preferred name				
Date of Birth				
Address				
Parent/Guardian(s) Conta	act Information			
Full Name(s)				
Street Address (leave blank if the same as above)				
Town Postcode				
Contact Numbers (Home/Phone)				
E-Mail Address				
Person to Notify in Case of Emergency and number (if different).				
Rehearsals This term will run from Satu	urday 22 nd April to Sunday 9	th July at Exeter Community Centre, 17 St David's		
Hill, Exeter EX4 3RG. Sessions shall take place from 10:30am-12:30pm.				
The final performance will take place on the last week of term (Sunday 9 th July) at the Cygnet Theatre;				
participants must be available to attend the theatre from 9am on the day of the performance. The total cost of				
participation is £108 (£9 per session x 12 sessions).				
Availability Please list any dates where your child/children would be unable to attend on the table below. Please note there will be an extended session on Saturday 1st July to allow for the dress rehearsal.				
Please mark any dates where your child/children would be unable to attend.				
Saturday 22 nd April				
Saturday 29 th April				

Saturday 6 th May	
Saturday 13 th May	
Saturday 20 th May	
Saturday 27 th May	
Saturday 3 rd June	
Saturday 10 th June	
Saturday 17 th June	
Saturday 24 th June	
Saturday 1st July 10am-1pm.	
Sunday 9 th July 9:30am-4pm	
To keep things fair, unexplained/unplanned absences not	t related to health during the previous term will be
considered when reviewing applications.	
I agree to a payment of £9 a session (£108 full payment	t)
Payment can be paid in full via bank transfer to:	
Anthos Arts Account Number: 57329370 Sort Code: 600806	
Alternatively, cheques to be made to Anthos Arts. Please contact us to discuss alternative payment methods/if vo	

Special Educational, Dietary and/or Health Considerations

Full payment must be made by Saturday 27th May. Please do not make any payments until your child/children's space in the group has been

have any questions.

confirmed.

Anthos Arts works hard to uphold and respect **equal rights**. If you have any **special educational, dietary,** and/or medical considerations that you believe will affect the participatory nature of Anthos Arts, and you feel are important to **declare**, please use the below box. This is so that we make sure measures are put in place and our young people are best supported during rehearsal times.

If these change, please do get in touch with us: <u>ant</u>	hos-arts@outle	ook.com		
Media/ photos/ videos A part of Anthos Arts' success has been our media at	tention. Please s	ign below to show that you are happy for		
us to photograph/video your child and that they can b	e a part of any i	nedia used within our publicity. Photos will		
not be taken/shared without parent's permission.				
I (parents/ guardians name)		Parent/ guardians signature		
allow my child (child's name)				
to be photographed and videoed for use by Anthos Arts publicity.				
Agreement and Signature By submitting this application, I affirm that the facts am accepted as a member of Anthos Arts 2023/24, an my own liability.		-		
Parent/Guardian(s) Name (Printed)				
Signature Signature				
Date				
This form should be completed and returned to:	applications.ar	nthos-arts@outlook.com. We will not be		

Thank you for filling out the application form.

able to confirm a space unless we have a completed application form. If you have any difficulties

submitting your form, please get in touch.

