

THE K. BOATENG ACADEMY OF PERFORMING ARTS
1 YEAR ACADEMY JUNIOR ACTORS COURSE (AJA)
AUDITION APPLICATION FORM

ATTACH 1 PASSPORT SIZED
PHOTOGRAPH HERE AND CLIP
ANOTHER TO THIS FORM

**PLEASE COMPLETE FORM IN BLOCK CAPITALS:
PLEASE WRITE N/A ON PARTS THAT ARE NOT APPLICABLE TO YOU.
A PARENT OR GUARDIAN MUST COMPLETE THIS FORM AND SIGN IT FOR YOU ON
YOUR BEHALF**

For your clarification your child must be between 8 - 17yrs on the start date of the course.

Please Tick which Age group you are applying for below:

(8-11yrs) (12-14yrs) (15-17yrs)

First Name(s): Middle Name(s):

Surname: Date of birth:

Gender (Please tick): Male Female Age:

Address
.....

P.O Box

Home Number..... Mobile number:

E-mail address:

Name and Date of School/College/ attending or attended:
.....
.....
.....

PARENT /GUARDIAN, CONTACT DETAILS:

Name:Phone Number:

Relationship to applicant:

Address if different to above:

.....

Postcode

Emergency contact telephone number: (Please provide us with One emergency contact number that we may need to ring if an emergency arises during sessions. This should be different from the home phone number and the parent and guardian phone number. We will always contact the parent/guardian in the first instance. Please also state their relationship to your child).

Emergency contact name:

Number:

Relationship to applicant:

Please state here any medical conditions that your child may have or any other issues that you feel are important for us to know, such as any allergies, special needs, disabilities or mobility issues, to help us with the planning and involvement of you in the acting classes. (Please continue on a separate sheet if necessary)

AUDITION INFORMATION

Auditions are being held from Dec 5th till 30th Dec 2011 in Ghana. Please state below your preferred audition date. Please note it is very unlikely that you will be able to change your audition date after you have chosen one, so make sure you will definitely be available to audition for that day.

Please note, you do not have to prepare any material for the audition. You will have an interview and a possible group workshop.

MY PREFERRED AUDITION DATE IS: _____

Please list below all relevant skills your child may have, e.g singing, dancing, playing a musical instrument, etc:

How did you hear about the Academy Junior Actors?

In the future, would you be interested in applying for any of the listed courses below which will be run by The K. Boateng Academy of Performing Arts?

Three Year Part- Time Acting Course (Weekend Actors Group)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Youth Theatre Group	Yes <input type="checkbox"/>	No <input type="checkbox"/>
12 week acting for screen	Yes <input type="checkbox"/>	No <input type="checkbox"/>
One to one acting/ audition techniques	Yes <input type="checkbox"/>	No <input type="checkbox"/>
African Dancing Classes	Yes <input type="checkbox"/>	No <input type="checkbox"/>
African Drumming Classes	Yes <input type="checkbox"/>	No <input type="checkbox"/>

FINANCIAL POLICIES

AUDITION AND REGISTRATION FEE & DEPOSIT – GHC 15. The audition fee is to be paid at the time of audition. Please bring the money with you on the day or your child will not be able to audition. Deposit of GHC 200 must be paid before your audition As a guarantee of your place on the course. The Deposit will be refunded to you if you are NOT offered a place on the course.

PLEASE DO NOT UNDER ANY CIRCUMSTANCES POST YOUR CASH AUDITION FEE WITH YOUR APPLICATION FORM. Applicants MUST bring GHC 15 in cash on the audition date.

The Tuition Fee –

Full tuition fee for the Academic Year is GHC 400. This means the remaining GHC 200 (after deposit) MUST be paid in full by the End of the first Academic Term

The full application form with 2 passport sized photographs of your child attached **MUST** be received by our office by Monday 26th Dec **via Post.**

REMEMBER

All applicants **MUST** bring GHC 15 in cash on the audition date.

All applicants **MUST** attach 2 passport sized photographs of themselves to their application form for archive purposes. Failure to do the following will result in an incomplete application form!

Photography, Filming, and Database consent: Occasionally the classes may be recorded or photographed for monitoring and publicity purposes and these photographs may be used in our publicity material and on the website. By attending the Academy Junior Actors Course and any future work with The K. Boateng Academy of Performing Arts, you agree to all the above.

Signature (Parent/Guardian): _____ Date: _____

FOR OFFICE USE ONLY: Application for entry January 2012 (1 yr AJA Course)

APPLICANT NO _____ APPLICANT JOINING DATE _____

APPLICANT GROUP NO _____

FEE PAID: CASH OTHER

The information in this document will remain strictly confidential, and will not be passed on to any third parties. If you have any queries regarding how to fill in this form, please e-mail auditions@kboatengacademy.com Please return this application form via post or in person.

FOR PERSONS SENDING COMPLETED APPLICATION FORMS VIA POST, PLEASE SEND TO THE ADDRESS BELOW.

**Administrator
The K. Boateng Academy of Performing Arts
Labone
Accra
Ghana
PMB CT 412**

