

THE ARTS CLUB CREATIVE TEENS THEATRE CLUB

Application Form

October 15, 2017 – June 4th, 2018 – Vancouver

NAME: _____ AGE: _____ Grade in Sep 2017: _____

PARENT/ GUARDIAN NAME: _____

ADDRESS: _____

PHONE NUMBER(S): _____ School Name in Sep 2017: _____

EMAIL: (parent /guardian) _____ EMAIL (applicant) _____

Although no experience is necessary for this program, the following information will help us in our planning. Please fill out the following as best you can.

On a scale of 1 (not confident) to 5(confident) , please circle and rate your experience of the following performing arts skills: (*If you are able to provide specific details, please list below*)

Dance

1 2 3 4 5

Detail (years, name of school and / or coach)

Acting

1 2 3 4 5

Detail (years, name of school and / or coach)

Musical Theatre

1 2 3 4 5

Detail (years, name of school and / or coach)

Private Voice Lessons

1 2 3 4 5

Detail (years, name of school and / or coach)

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Other

1 2 3 4 5

Detail (years, name of school and / or coach)

What was the last live performing arts show you watched?

What was the last performing arts show you participated in? What role did you have?

Briefly explain why you would like to join this program:

The Creative Teens Program brings in theatre artists who specialize on a specific drama technique throughout the year. Please rank the following (1-10 – where one is most important) as to what workshops you would like to see.

- Juggling
- Mask Work
- Dance (Specifically _____)
- Memorizing Lines
- Clowning
- Musical Theatre
- Accents (Specifically _____)
- Vocal Techniques
- Stage Combat
- Singing
- Lighting
- Sound Effects
- Physical Theatre
- Role of the Director

Are there any dates that will conflict with your attendance in the Creative Teens program?