

Applicant Name:

Amount:

Form No:



APPLICATION FORM

Affix Passport Size Photograph

Start Date _____ End Date _____

Workshop Information:

- Workshop Applied for: Acting Workshop Voice & Speech Light & Design Others _____
- Duration of the Workshop: 4 Months 2 Months 15 Days
- Days of the Workshop: Sat-Sun Mon-Fri Mon- Sat
- Language: Hindi/English Hindi/ English Hindi/English Mix
- Timing 10am – 1pm 1 – 4 pm 5 – 8 pm

Applicant Information:

Name in Full (in block letters).....

Mobile.....EmailID.....

Facebook Id.....Date of Birth.....

Father’s NameMobile No.....

Present AddressAlternate No.....

Permanent Address.....Landline No.....

Educational Qualifications.....

Prior Theatre Experience (If Any).....

How did you come to know about this workshop.....

Current Occupation: (Professional/Student/Employer/Others)

Present Employer/College.....Working/Studying Since.....

Current Designation.....

Working Hours.....Weekly off.....

Date.....

Student Signature

Date _____

RECEIPT

- Applicant Name (Mr/Ms/Mrs).....
- Workshop Applied for: Acting Workshop Voice & Speech Light & Design Others _____
 - Duration of the Workshop: 4 Months 2 Months 15 Days
 - Days of the Workshop: Sat-Sun Mon-Fri Mon- Sat
 - Language: Hindi English Hindi/English
 - Timing 10am – 1pm 1 – 4 pm 5 – 8 pm

Received amount of (In Words).....

Payment Details

Mode: Cash Cheque Digital Payment

Cheque/Transaction details:
Admission will only be confirmed after realization of the cheque.

Amount _____

(SRCPA Team Member’s Name & Signature _____)

Shri Ram Centre for Performing Arts

4, Safdar Hashmi Marg, Mandi House, New Delhi-110001, Tel: 011-23714307, 9599947637
E-mail: shriramcentre@srcpa.in Website: www.shriramcentre.org Facebook: facebook.com/shriramcentre

RULES AND REGULATIONS FOR THE PARTICIPANTS:

1. **Discipline:**

- i) Late coming will not be allowed.
- ii) The participants are required to maintain minimum 95% attendance.
- iii) Any misconduct during the class or in the SRC Campus will result in termination of your participation in the program.

2. **Fees:**

- i) The fee is non-refundable in any situation. No request for the same will be accepted.

3. **Certificate:**

- i) The certificate for the participation will be awarded only to the participants who have completed the course with **95% Attendance**.
- ii) No duplicate certificate will be issued in any case (Lost/misplaced).
- iii) In case of Production oriented workshop, the participants must have performed on stage to be eligible to get the certificate.
- iv) I do agree to abide by management's decision to assign me any character from the designated play.
- v) The show date of the performance is prescheduled while announcing the workshop however the same may change due to unavoidable situation /management decision.

Declaration:

- I am not suffering from any mental or psychological illness.
- I certify that I have read all the rules & regulations mentioned above and agree to accept the same.

Name of the Participant _____

Signature of Participant _____

Date: _____