



Application Form

Theatre Workshop for Children

Name in Full (in block letters).....Date of Birth.....

Studying in Grade.....

School Name.....

Home Address.....

.....

.....Landline No.....

Father's NameMobile.....

Occupation.....E mail ID.....

Mother's Name.....Mobile.....

Occupation.....E mail ID.....

How did you come to know about this workshop Website Newspaper Advertisements Social Media

SRCPA Banners Advertisements Emails from SRCPA Others (Specify) _____

Particulars of the guardians responsible for pick and drop:

S. NO.	Name	Contact No	Relationship	ID Proof
1.
2.
3.

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/shriramcentre

THEATRE WORKSHOP FOR CHILDREN

General Instructions

1. Parents are not allowed to wait inside the premises.
2. Long /frequent / un-informed absence may force the Workshop director to change the casting; the parents are expected to understand and accept.
3. Parents may be requested to support the Production with commonly used costumes or props if required.
4. Parents are advised not to interfere in the production. The workshop will ensure that each child performs on stage however the role allocation will be done by the director; no discussion on the same will be entertained.
5. Batch once allotted will not be changed later.
6. The fee is non-refundable.

Declaration by Parents

1. My child is not suffering from any disorder (mental/physical) to effect the participation in the workshop.
2. I understand that any kind of undesirable/indisciplinary activities can lead to cancellation of my ward's admission.
3. I take the responsibility for the pick and drop of my child for the workshop. Details of all the individuals responsible for picking/dropping will be furnished at the time of registration.
4. I'll ensure that my child does not carry expensive phones, cameras and cash.
5. In case required I'll pre inform the office regarding my child's absence.
6. The general instructions mentioned above are acceptable to me.

Date:.....

Parent's Signature