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Date of joining :	<input type="text"/>	M
RTC use :	<input type="text"/>	C

**2010-2011 STUDENT DETAILS**

Family Name:	First Name(s):
Address:	Date Of Birth:
	Home Tel:
Postcode:	Mobile:
Parent/Guardian Name:	Relationship to student:
Address if different from above:	Home Tel:
	Mobile:
E-Mail:	

**EMERGENCY CONTACT**

Name:	Relationship to student :
Address:	Home Tel:
	Mobile:

**Joining fee for new members is £15**

Group Name	Ages	Day/Time	Annual Membership	Annual Tuition Costs	Total Annual Costs	Monthly Standing Order Payment	Tick
Musical Theatre – Morning	7-12	Sunday 10:30 -12:30	£120	£60	£180	£15.00	
Musical Theatre – Afternoon	13-21	Sunday 15:00 -18:00	£180	£60	£240	£20.00	
Riverside Singers – Juniors	7-13	Sunday 12:30 13:30	£120	£60	£180	£15.00**	
Riverside Singers – Seniors	14-21	Sunday 13:45 - 4:45	£120	£60	£180	£15.00**	
Dance Academy – Early		Monday 18:00 19:00	£120	£60	£180	£20.00**	
Dance Academy – Later		Monday 19:15 - 20:45	£216	£84	£300	£25.00**	
Static Crew -Street Dance		Saturday 10:00 –11:30	£252	£108	£360	£30.00	
Fracture – Street Dance		Saturday 10:00 –11:30	£252	£108	£360	£30.00	
Acting Workshop	13-21	Wednesday 19:00-21:00	£180	£60	£240	£20.00	

**\*\*This fee is reduced by £5 per month if you are also a member of another group. Fracture and Static Crew are by invitation and audition only.**

- ★ Fees are payable on the 1<sup>st</sup> of each month and throughout the year (including summer months). As standing orders can take some time to be processed by the bank, the first month's fees should be paid by cash or cheque.
- ★ Should a member decide to leave RTC, then written or e-mail notification is required, otherwise we expect to continue collecting monthly fees. Cancellation of the standing order is the responsibility of the payer.

<b>Bank:</b>	HSBC	<b>Branch:</b>	Bury St Edmunds	<b>Reference</b>	Please use your child's name
<b>A/C No.:</b>	91501550	<b>Sort Code:</b>	40-15-22		

## STUDENT'S MEDICAL INFORMATION

Please provide details of any medical conditions or allergies that your child may suffer from i.e. epilepsy (stroboscopic lighting may be used in productions) diabetes, asthma, allergies (such as penicillin or adhesive plasters), etc:

Doctor's Name:

Surgery Name and Location:

### Parent/Guardian Consent

In the event of an accident, should you be unable to contact me, I give my consent for my child, named above, to receive medical attention, including x-ray, if necessary.

Signed:

Date:

## GIFT AID DECLARATION

As a registered charity, RTC is able claim gift aid on membership fees and some other payments. If you would like RTC to claim Gift Aid on your donations please complete the declaration below.

I wish the Riverside Theatre Company registered charity to treat any eligible payments I make as Gift Aid donations from when my child(ren) joined Riverside Theatre Company. I will notify you of any change in my circumstances which affect Gift Aid refunds,

Name:

Address:

I am a UK taxpayer and hereby authorise RTC to claim gift aid on all eligible payments now and in future years.

Signed:

Date:

## PHOTOGRAPHS AND IMAGES OF OUR MEMBERS



### Guidelines regarding photographic/video images of children

The RIVERSIDE THEATRE COMPANY (RTC):

- Will avoid the use of first names and surnames of students in personal photographs or video in any media. The only exception to this will be when a programme is produced for a show.
- Will only use images that it considers appropriate for the organisation, and will only use images of students in suitable dress.
- Will only use such images for promotion and publicity on the RTC website and when released to all password holders via the secure area of the RTC website.
- Will ensure that there are never one-to-one photographic/video sessions.
- Will ensure that official photographs/photographers are clearly identified.

Any concerns regarding inappropriate or intrusive photography or video will be reported and investigated through the RTC's child protection policy (copy available upon request).

## PARENT/GUARDIAN SIGNATURE

I would like my child named above to join the Riverside Theatre Company. In signing this form I agree to its membership terms and conditions, including guidelines on use of photographs and images. I also agree to inform the RTC immediately of any changes to the member's personal, medical or contact details.

Signed :

Date:

Print your name:

This information is held in accordance with the Data Protection Act 1998.