

The Cast Enrolment Form

Please tick box where applicable

Ref No _____

(Office use only)

Please indicate which academy are you interested in:-

Caerleon academy

Rougemont academy

Monmouth academy

Whitchurch am academy

Whitchurch pm academy

CAST Buddies

Name _____

Age _____

Address _____

Postcode _____

Date of Birth _____

Male

Female

Parent Guardian Name _____

Telephone Number _____

Mobile Phone Number _____

E-Mail _____

Alternative Contact Number _____

(Relationship to pupil) _____

Please state any medical history we need to be aware of;-

Any other information that we need to be aware of;-

Any relevant experience (drama clubs, dance classes, singing/choir, instruments etc.):-

In order to reserve a place, please send this form and a deposit of £35.00

(Deposit deducted from term fee) to:-

The Children's Academy of Stage Training.

Ffwrwm Arts Centre,

High Street,

Caerleon,

South Wales.

NP18 1AJ.

(Cheques payable to The Cast)



Playing a Role in Young People's Development

Please note that photography and filming may take place from time to time during our presentations and performances subject to strict safeguard.