**Denstone Players Permanent Member Registration Form**

Please indicate how you would like to be involved with Denstone Players. The information you give will help us choose suitable play scripts.

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Forename |  |  |  |  |  |  | Age Range: |
| Surname |  |  |  |  |  |  | 18 or under |
| Address |  |  |  |  |  |  | 19 - 25 |
| Address |  |  |  |  |  |  | 26 - 35 |
| Address |  |  |  |  |  |  | 36 - 45 |
| Post Code |  |  |  |  |  |  | 46 - 55 |
| Email |  |  |  |  |  |  | 56 - 65 |
| Mobile No. |  |  |  |  |  |  | 66 or over |
| Home Tel No. |  |  |  |  |  |  | Prefer not to say |

|  |  |  |  |
| --- | --- | --- | --- |
|  | Female |  | Male |

**Please tick as many boxes as you wish**:

|  |  |  |  |
| --- | --- | --- | --- |
|  | I am interested in: |  |  |
|  |  |  | Never acted before |
|  | Acting |  | Acted before |
|  |  |  | Considerable Acting Experience |
|  | Directing |  |  |
|  |  |  |  |
|  | Set Building/Design |  | Play Reading Committee |
|  |  |  |  |
|  | Costume |  | Publicity |
|  |  |  |  |
|  | Props |  | Committee membership |
|  |  |  |  |
|  | Prompt |  | Sound |
|  |  |  |  |
|  | Lighting |  | Make-up |
|  |  |  |  |
|  | Organised theatre visits |  | Front of House |

Any other relevant information: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Please return this form along with your £5 Registration Fee (cheques to Denstone Players) to the Secretary: Mr H Marsh, Peak Edge, Bridge Hill, Mayfield. ASHBOURNE, DE6 2HN**