Ridgeway Studios

Ridgeway Studios, P.O Box 480, Potters Bar, EN6 9EX. Tel: 01992 633775. E-mail: info@ridgewaystudios.co.uk

Adult Application Form

Please complete with any relevant professional work / amateur / school productions

Name: Mr/Mrs/Mis	SS			
Address:			Town	
County:			Postcode	
Home telephone:			_Mobile:	
E-mail:			_	
D.O.B:	Age:	Eye colour:	Hair o	colour:
Height:		Nationality:_		
photograph.			please include a 10x8	B B/W head and shoulder
	n:			<u>-</u>
Dance experience		Singing expe		
Instruments playe	d:			
			Liverpool / Dorset / Yo	orkshire etc:
		Declara	tion	
understand that R terms notice in wr	idgeway reserve iting when leavir	nat the information the the right to refuse	given is correct at time admission if necessa os or to pay a terms fe	ry. I agree to give a