

Student's Name:	Date of Birth:
Summer School: 2 nd Aug to 5 th Aug 2027..... £190.00	
<u>Bank details for payment</u> Natwest Bank Acc Name: School of Theatre Excellence ltd Acc: 29534836 Sort code: 60-30-09 Please use students name as reference.	
Home Address:	
Parents Names:	
Telephone:	Mobile:
Email Address: Attendee:	Parent:
School/College details:	
Does your child have any allergies/medical conditions we should be aware of:	

If your child is not a regular student of SOTE please tell us what performing arts training they have had:

☐ I grant permission to SOTE to safely store and use my personal information in order to contact me.

Signature of Parent:

The School of Theatre Excellence reserve the right to take photographs & video footage during our sessions, which are solely for the use by the school for educational & promotional purposes.

SOTE Contact details

Chris Sheils: 07739 904318

Marcus Watson: 07860 865551

When completed this form should be returned to: chris@sotebirmingham.co.uk
Correspondence Address: **School of Theatre Excellence, 38 Northfield Road, Birmingham. B30 1JH**
Company Number: **07147306** Reg Office Address: **38 Northfield Road, Birmingham. B30 1JH**