



## Play In A Week 2019

### Application Form

Now that the 21<sup>st</sup> Play In A Week is on the way you need to tell us that you want to come along by filling in our Application Form.

**EVERYONE COMING TO THE THEATRE DURING PLAY IN A WEEK MUST COMPLETE A 2019 APPLICATION FORM.**

**YOU CAN DO THIS EITHER ON-LINE, OR USING THIS FORM.**

*For practical reasons we have to limit the number of participants to around 50, with sufficient volunteers and helper numbers to make it happen. Preference will be given to those who have previously participated in Play In A Week.*

**Please complete your application on-line at:**

<http://playinaweek.org.uk/productions/2019-2/2019-application-form/>

**OR if you cannot do that, please fill in the form below and return it to us at:**

*PIAW c/o Helen & Geoff Arnold, 363 Leatherhead Road,  
Malden Rushett, Chessington, Surrey, KT9 2NQ*

**We must receive your form BY THE END OF MAY at the latest.**

*Any questions?*

*Please contact Helen and Geoff Arnold on 01372 726 571 or at  
admin@playinaweek.org.uk*

**THANK YOU!**

Data Protection: Just so you know, we only keep the personal data you provide on this form in order to be able to contact you with information about Play In A Week, our fundraiser events, and related activities. We do not pass your personal data on to anyone else. Data is stored electronically in a secure format only accessible to the Producers of Play In A Week. If you do not want us to keep your data after this year's production is over, please let us know and we will delete it.

## Application Form

I would like to take part in Play In A Week 2019 which runs from Monday 22<sup>nd</sup> July to Sunday 28<sup>th</sup> July 2019.

NAME: \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_

EMAIL ADDRESS: \_\_\_\_\_

**Please tick whichever boxes apply to you.**

I am a PARTICIPANT/PERFORMER  **or** I am a VOLUNTEER/HELPER

I am available EVERY DAY  , **or**

I am available on these days: MON TUES WED THUR FRI SAT SUN

**Emergency Contact.** Please give us the name and telephone number of someone we can contact if you become unwell or in the event of an emergency.

NAME: \_\_\_\_\_

TELEPHONE NUMBER: \_\_\_\_\_

### **PARTICIPANTS and PERFORMERS ONLY:**

I will  , **OR** I will not  be able to make a £50.00 voluntary contribution to help with the 2019 Play In A Week production and running costs.

The compulsory Nomad Membership fee of £15.00 and the voluntary contribution of £50.00 (if you choose to make one) are both payable on Monday 22<sup>nd</sup> July at the theatre please. You can pay by cash, or by cheque made payable to "The Nomads".

**Gift Aid: Please tick this box  if the person making the voluntary contribution is a UK tax payer. The voluntary contribution cheque for £50.00 must be made payable to "Nomad Players Limited".** We will then contact you about gift aid so that we can reclaim the valuable tax from your donation and make the money go even further!