



Inspiring Talent
Whakaihiihi Pumanawa

CENTRE CITY MUSIC THEATRE

Emerging Talent School Application
9-17 January 2016

Student's Surname		Student's First Name	
Street Address		Home Phone	
Suburb, City, Post Code		Mobile Phone	
Email Address		Business Phone	
Date of Birth		Age	<input type="checkbox"/> M <input type="checkbox"/> F
School		Year as of February 2016	
Which ethnic group do you belong to? (For funding purposes only) Tick any that apply.	<input type="checkbox"/> NZ European <input type="checkbox"/> Asian <input type="checkbox"/> Maori <input type="checkbox"/> Other ethnic group <input type="checkbox"/> Pacific Island		

If under the age of 18 please supply parent/caregiver details below.

Mother/Caregiver Name		Father/Caregiver Name	
Street Address City, Post Code		Street Address City, Post Code	
Home Phone		Home Phone	
Business/Mobile		Business/Mobile	
Email		Email	

Have you attended previous CCMT ETS or Focus Programmes? YES NO

If yes, what year(s): 2006 2007 2008 2009 2010 2011 2012 2013 2014 2015

List any other CCMT master classes or workshops you have attended: _____

Enrolment: Email your completed form and attach to your application a brief CV with the following details:

- *Any dance, drama or vocal training you have had and where
- *Exams (including last grade passed) and/or competitions
- *Shows in which you've performed and your role
- *Headshot or recent photo

Fees: 9-17 January 2016 full time fees are \$495. Fees are non-refundable and must be paid in full by 15 December 2015. Cheques should be made out to CCMT or make direct credit payments to:

ASB Bank Account: 123216 0106967 01

Please identify name and ETS on your payment

Email your completed enrolment form to: Doris Riegel at doris@riegel2020.com

Confirmation and programme details will be emailed to all students before the end of the year.

Student Name _____

MEDICAL INFORMATION & EMERGENCY CONTACTS

To the best of my knowledge, I have no health condition which would interfere with my attendance at the CCMT Emerging Talent School, or interfere with the experience or enjoyment of any other student attending these CCMT programmes. Any condition I have, or medication being taken is listed below. In the event of an emergency associated with any health conditions, and where my parent, guardian or emergency contact cannot be reached, I consent to being taken into the care of a health professional and undertaking any treatment they may consider necessary.

Any medical or other conditions: _____

Do you carry any medication? YES / NO Please specify _____

Emergency

Emergency Contacts:	Name	Relationship	Phone #
	_____	_____	_____
	_____	_____	_____

CCMT Terms and Conditions

- ★ I understand that the payment is non-refundable for accepted applicants. CCMT has the sole discretion to accept or decline any applications and to consider any requests for refund should unforeseen serious circumstances prevent attendance after enrolment and before the programme commences.
- ★ I agree to attend all scheduled classes and workshops during full programme period.
- ★ I agree that I will remain on the premises of the Bruce Mason Centre for the duration of the programme session and not leave the building unless advised to by CCMT. Students under the age of 14 are not permitted to leave the building during lunch break unless written permission is provided by a parent/carer and arrangements are made for the student to be accompanied by an older sibling or student.
- ★ I agree to reimburse the Bruce Mason Centre for any damage or loss caused by me to any equipment or to the premises.
- ★ I consent to the taking of any moving or still image of me during the CCMT Emerging Talent School or related to it; and to the use of any written feedback I may give; in advertising, commercial or promotional material for future CCMT Programmes.
- ★ I acknowledge that there is to be no private or personal video recording of CCMT Emerging Talent School.
- ★ I understand that, if at any time during the course of the CCMT Emerging Talent School, I exhibit behaviour that is disruptive, destructive, or dangerous I may be asked to leave the programme.

I have read and agree to adhere to the Terms and Conditions of attendance at CCMT Emerging Talent School as set out above.

Student Signature

Date

Parent/Caregiver Signature (if under 18yrs)

Date