DRAÍOCHT

THEATRE PROJECT 2012

APPLICATION FORM

NAME: **MALE/FEMALE:**

ADDRESS:

PHONE: **E-MAIL:**

DATE OF BIRTH:

WHAT ATTRACTS YOU TO THIS PROJECT

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WHAT DO YOU THINK YOU WILL BRING TO IT

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PREVIOUS ACTING EXPERIENCE IS NOT REQUIRED FOR THIS PROJECT.

DO YOU HAVE ACTING EXPERIENCE? YES NO

IF YES, PLEASE GIVE BRIEF DESCRIPTION

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WORKSHOPS WILL TAKE PLACE IN DRAÍOCHT, PLEASE CIRCLE WHICH DAY/TIME SUITS YOU BEST.

PLEASE GIVE A FEW OPTIONS IF POSSIBLE

MON	**10am- 1pm**	**2pm- 5pm**	**7pm- 10pm**
TUES	**10am -1pm**	**2pm-5pm**	**7pm - 10pm**
WED	**10am-1pm**	**2pm-5pm**	**7pm - 10pm**
THURS	**10am-1pm**	**2pm-5pm**	**7pm-10pm**
FRI	**10am-1pm**	**2pm-5pm**	**7pm-10pm**
SAT	**10am-1pm**	**2pm-5pm**	**7pm-10pm**

Please return this completed form to:

Emer McGowan, Director, Draiocht, Blanchardstown, Dublin 15

For further enquiries, Emer can be contacted on 01 8098027 or on emer@draiocht.ie

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