

# membership application form

Name \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Mobile No \_\_\_\_\_ Telephone No \_\_\_\_\_

e-mail address \_\_\_\_\_

Date of application \_\_\_\_\_ Male  Female

## Full Membership (ACTORS WHO WISH TO TAKE CLASSES)

Equity No \_\_\_\_\_ Spotlight Link \_\_\_\_\_

Playing Age: late teens-20s  30s-40s  50 upwards

1 year (£55)  6 mths (£37.50)  (Equity members will receive a £5.00 discount for their first membership)

Renewal fees £55/£37.50 (£5 discount if you renew before your membership expires)

### PLEASE ENCLOSE:

- CV and headshot (or Spotlight CV)
- Proof of union/Equity membership or letter of exemption and/or **copy** of training graduation certificate or diploma
- Passport-sized photo
- Payment. We only accept credit/debit card payments (see below)

Signed \_\_\_\_\_ I agree to the Actors Centre terms and conditions

Your application will be assessed and you may be called in for an assessment interview.

## Associate Membership (INDUSTRY ASSOCIATES WHO WISH TO OBSERVE, BUT NOT TAKE, CLASSES)

Profession \_\_\_\_\_

Professional Affiliation (BECTU, Directors Guild etc) \_\_\_\_\_

### PLEASE ENCLOSE:

- Letter of application
- CV
- Annual Payment £25.00. We only accept credit/debit card payments (see below)

Signed \_\_\_\_\_ I agree to the Actors Centre terms and conditions

## Credit Card Details (if applicable)

Card Number \_\_\_\_\_ Start Date \_\_\_\_\_ Expiry Date \_\_\_\_\_

Security No (last 3 digits on back of card) \_\_\_\_\_ Issue Number (Switch Only) \_\_\_\_\_

(Card details will be shredded once your membership payment has been processed)

**PLEASE RETURN YOUR APPLICATION FORM TO:**

**MEMBERSHIP DEPARTMENT, THE ACTORS CENTRE, 1A TOWER STREET, LONDON, WC2H 9NP**