

The Bridge Theatre Training Company

Professional Acting Courses

Application Form

Please attach
a recent
photograph
here

Course applied for **2 Year Acting Course**
please tick box **1 Year Postgraduate/Post Experience Course**

Surname_____ First name(s)_____

Title (Mr/Ms)_____ Nationality_____

Date of birth_____ Height_____

Address_____

Postcode_____ Email address_____

Telephone number_____ Mobile_____

Education and qualifications (including secondary schools and colleges attended with dates)

Employment Details

Tell us something about yourself and why you want to do the course. We would also like to know about any drama experiences and related skills that you have.

What non-drama related skills do you have? (e.g. driving, typing, languages...)

How did you hear about The Bridge? _____

I apply for admission to The Bridge and enclose a cheque/postal order for £25 crossed and made payable to The Bridge Theatre Training Company. I confirm that I will attend the audition at **10am on Saturday**, _____.

(Dates can be found on the [Auditions](#) page of The Bridge's Website. Please select one).

Signature _____

Date _____

Please send your application form and audition fee to:

**The Bridge Theatre Training Company, Cecil Sharp House, 2 Regent's Park Road,
London NW1 7AY**