

# Application form

If you would like your school to take part in Making Space please complete the application form below. Please make sure all fields are completed as incomplete forms cannot be processed. Completed forms can be posted or emailed to: **kallsop@boh.org.uk**



## Applicant details

First name: .....

Last name: .....

Job title: .....

Email: .....

Tel: .....

You can nominate a second contact who will also receive communications from us leading up to Making Space 2019. Please provide details below.

First name: .....

Last name: .....

Job title: .....

Email: .....

Tel: .....

## School details

Headteacher: .....

School name: .....

Address: .....

Postcode: .....

Email: .....

Tel: .....

Website: .....

## Additional information

### Is your group:

Primary school .....

Secondary school .....

Community/dance group .....

### How do you expect to involve young People in this project?

Performer ..... Choreography .....

Music ..... Costume .....

Other (please state) .....

### How many young people will you bring to perform at Making Space 2019? (max 25)

.....

### How many young people will you involve overall?

.....

## Declaration

By signing this form you agree that the information is accurate.

I wish to receive relevant information about future projects, workshops and productions:

Email ..... Post ..... Phone .....

Date: .....

Signature: .....