**Mansﬁeld Musical & Drama1c Society (MMuDS) and Theatrecra: Youth Unleashed (TYU) present:**

**2024 Mansﬁeld Summer Youth Drama Program**

**Monday 15 – Friday 19 January 2024**

Thanks to generous support from the **Black Summer Bushﬁre Recovery Fund**, MMuDS is thrilled to oﬀer an exci4ng 5-day project for young people to develop their performance skills.

Young people aged **13 – 19 years**, from Mansﬁeld Shire and surrounds, are invited to apply from 28th September 2023.

This is a non-residen’al program to be run at the Mansﬁeld Performing Arts Centre.

Lunch, Dinner and snacks will be provided on each day of the program.

The program will include Performance Workshops, Lecoq Mask Method, Movement & Voice, Rehearsals and a ﬁnal Showcase of skills learned.

Par$cipants will work with a team of arts leaders from Theatrecra6 Youth Unleashed (who successfully ran the 2023 Drama Camp)

Thanks to funding from the **Black Summer Bushﬁre Recovery Fund**, par&cipa&on in this program is fully funded. A maximum of 20 places is being oﬀered.

If you are oﬀered a place in the program, a $50 non-refundable levy will be payable to conﬁrm your availability for the full period of the program.

For more informa+on, contact Ian Todd at treasurer@mmuds.org.au.

**Applica’on Form Summer Youth Drama Program**

**Monday 15 January – Friday 19 January inclusive**

**Applicant Details**

First Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Last Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_\_\_\_\_\_

Age at 01/01/2024: \_\_\_\_\_\_\_\_\_

Preferred Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Preferred pronoun: he / she / they (please circle)

Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant Mobile: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applicant Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent / Guardian names(s) (if under 18):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent / Family mobile and email (if under 18):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Preferred T-shirt size: XS S M L XL XXL (please circle)

**Medical Informa/on**

FOOD ALLERGIES / Other allergies / Phobias / Physical injuries / Mental health concerns / Special considera/ons (add an extra page if needed):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dietary Considera.ons \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Strong Food Dislikes \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Lunch, Dinner and snacks will be provided on each day of the program.

**Emergency Contact 1**: Parent or Guardian

Name and Mobile Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Emergency Contact 2**: Non-Parent / Guardian (2nd preference)

Name and Mobile Number:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If contact cannot be made with the above-named persons in the event of an emergency, illness or injury, I authorize representa(ves of Mansﬁeld Musical & Drama%c Society / Theatrecra. Youth Unleashed to refer the applicant to a medical professional or hospital emergency. I understand that these organisa,ons will not be responsible for any expenses incurred as a result of this ac,on.

**Behaviour Expecta0on**

I understand that exemplary behaviour, coopera+on and personal conduct is required throughout this program, and that any behaviour that is deemed inappropriate, damaging or dangerous to the experiences of others may result in exclusion from the program.

No alcohol, tobacco products or non-prescrip’on drugs are to be brought to the venue by par+cipants of any age.

No par’cipant may leave the venue without speciﬁc permission / sign out by the TYU leaders.

**Photo Permission**

I give permission for photo images of the Applicant taken during the 2024 Summer Youth Drama Program by representa3ves of MMuDS and TYU to be used for publicity and promo)on of this event and future MMuDS / TYU ac)vi)es.

I consent to wri,en extracts of the Program’s feedback form to be used to inform and promote future programs.

I accept and give permission for the TYU team to use video footage from this program for their own study and professional/ar3s3c development.

**Applicant Signature (for over-18’s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name (print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Parent / Guardian Signature (for under-18’s):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Name (print): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** **Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Applica’ons close November 30 2023.**

**All applicants will be no+ﬁed about places in the Program by 1st December 2023. Successful applicants will be invoiced for the $50.00 to secure their place in the Program when paid.**

**Applica’on Form Summer Youth Drama Program**

**Monday 15 January – Friday 19 January inclusive**

**All Par’cipants - Statement Of Interest:**

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Why do you want to be involved in this Program?

What would you like to experience or learn?

Why do you like to par0cipate in performing arts?

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Your Performing Arts Experience (to aid our planning, not selec2on criteria!)**

Please circle the aspects of performance in which you have experience, skill or training:

Ac#ng

Dance

Singing

Mime

Improv

Sound

Ligh%ng

Stage hand

Choreography

Acroba’cs

Choir

Ensemble

Clowning

Instrument

Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_