Giles Foreman Centre for Acting London

PART-TIME REGISTRATION FORM

(please tick all the subjects and options that interest you)

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REGULAR COURSES, PLUS EVENING AND WEEKEND	SESSIONS AND SHORT WORKSHOPS
□ ACTING □ MOVEMENT □ VOICE □ IMPROVISATION	$\hfill \square$ Mon $\hfill \square$ Tues $\hfill \square$ wed $\hfill \square$ Thurs $\hfill \square$ Fri $\hfill \square$ Sat $\hfill \square$ Sun
☐ MEISNER TECHNIQUE ☐ CHARACTER ANALYSIS	□ EVENING □ WEEKEND □ 4/5-DAY □ 7-DAY □ 4-WEEK
□ OTHER PART-TIME: (please give details)	
SURNAME:	MOBILE:
TITLE / FORENAME:	OTHER PHONE:
ADDRESS:	EMAIL: (please print clearly)
London Borough, if applicable:	WEBSITE, if applicable:
COUNTRY OF ORIGIN / NATIONALITY:	
POST CODE:	BIRTH-DATE / PLAYING-RANGE:
SPOTLIGHT VIEW-PIN if applicable:	IMDB / MANDY PROFILE:
I am interested in the course(s) above. DATE//20 SIGNATURE:* * This does not commit you to any option. Terms and Conditions are available on our website, or upon request in print format.	
EDUCATION: (please attach a CV if you prefer, or continue overleaf)	
PERFORMANCE EXPERIENCE: (please attach a CV if you prefer, or continue overleaf)	
HOW DID YOU HEAR ABOUT GFCA? (please tick all the	nat apply)
Recommendation? (If so, what is the person's name?	
How did you find us? \Box Our Display Cards (where?)	□ Facebook □ Twitter
☐ GFCA performance or film (details)	\square Search engine \square The Stage
\square GoAbroad \square Metro / Evening Standard \square Contacts \square	Actors Yearbook \square Youtube \square Other \square
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