



Performing Arts Academy
Application Form

Name _____
Surname First Name Middle Name

Current Address _____
Street Address

_____ *B.C.* _____
City Province Postal Code

Telephone () _____ student e-mail _____

Age _____ D.O.B. _____ Male _____ Female _____
Year Month Date Check appropriate one

Please circle one: **IN CATCHMENT** **OUT OF CATCHMENT**

School Currently Attending _____

Parent/Guardian(s) _____,

Address (if different from above) _____

_____ *Street Address*
_____ *B.C.* _____
City Province Postal Code

Telephone () _____ parent e-mail _____

Applying for enrolment in Grade _____ September, 20 _____

Have you had any previous drama experience? (Please fill in all experience, including general dates)
