



**Theatre Workout Ltd**  
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### Workshop Leader Information

Please take a few minutes to inform Theatre Workout of your experiences, abilities and interests regarding theatre and workshops. Send this, along with your CV & photo, to the above address.

<b>Name:</b>		<b>DOB:</b>	
<b>Address:</b>			
<b>Email:</b>			
<b>Telephone No:</b>		<b>Mobile:</b>	
<b>Equity:</b>	Yes / No	<b>CRB Clearance:</b>	Yes / No. If no, are you prepared to get clearance?
<b>Have you ever been convicted of a criminal offence?</b>			
<b>Are you Self Employed?</b>		Yes / No	
<b>Nationality &amp; Ethnicity:</b>		<b>Do you need a work permit</b>	Yes / No / NA
<b>Training:</b>			
<b>Please provide details of your professional experience in theatre?</b>			
<b>Musical Theatre</b>	<b>Musical Instrument's/Singing abilities</b>		
<b>TIE</b>	<b>Straight Theatre</b>		
<b>Shakespeare</b>	<b>Devising Theatre</b>		

