



'PETER PAN' – Chameleon Group Application Form Autumn 2024

Participant Details:

(If applying for more than one child, please include both sets of details on one form)

Name:	
Preferred Name/Pronoun:	
Date of Birth:	
Address:	
Parent/Guardian/Primary Carer Names:	
Contact Numbers:	
Contact Emails:	
The performance of <i>Peter Pan</i> will be on Saturday 7 th December. I know that my child/children can be available for this date.	Yes/No

Permissions and Emergency Contacts:

As part of our safeguarding policy, Anthos Arts requires children to have nominated people who are permitted to collect them from us at the end of each session/trip/event.

Below please list the names of nominated adults who have permission to collect your child on your behalf. A nominated person must be over 18 years of age and grandparents must be listed as nominated people, if parents wish to name them as such. **Note: children will not be allowed to leave a session with an adult not listed on their form without written consent. Should a different person than those listed on this form be required to pick a child up then this must be arranged in advance of the session in writing.**



Those nominated shall serve as emergency contacts, should we be unable to contact primary carers in the event of an emergency.

Name of Nominated Person #1:

Contact Number:

Relation to Child:

Name of Nominated Person #2:

Contact Number:

Relation to Child:

Name of Nominated Person #3:

Contact Number:

Relation to Child:

Parents/Carers/Guardians are at liberty to disclose the names of anyone who they know are NOT allowed to collect children on their behalf. Anthos Arts are committed to supporting safeguarding and the safety of children and so please let us know if you wish to name any such persons.

If your young person is aged 11 or over, you are welcome to give permission for them to travel home independently (siblings under age 11 will still require collection by a named person). Please highlight/delete as appropriate below if you wish to do this:

- I am happy for my child to travel home independently from sessions. YES/NO.

Rehearsals/Availability:

This term will run from Saturday 9th September to Saturday 9th December at **Exeter Community Centre, 17 St David's Hill, Exeter EX4 3RG** as listed below.

The final performance will take place on Saturday 7th December at the Cygnet Theatre; participants must be available to attend the theatre from 10am on the day of the performance AND the dress rehearsal in order to be considered for a space.

Please mark any dates where your child/children would be unable to attend.	
Saturday 7 th September 10:30am-12:30pm	
Saturday 14 th September 10:30am-12:30pm	
Saturday 21 st September 10:30am-12:30pm	
Saturday 28 th September 10:30am-12:30pm	



Saturday 5 th October 10:30am-12:30pm	
Saturday 12 th October 10:30am-12:30pm	
Saturday 19 th October 10:30am-12:30pm	
Saturday 26 th October 10:30am-12:30pm	
Saturday 2 nd November 10:30am-12:30pm	
Saturday 9 th November 10:30am-12:30pm	
Saturday 16 th November 10:30am-12:30pm	
Saturday 23 rd November- 10:30am-12:30pm	
Saturday 30 th November 10am-12:45pm DRESS	
Saturday 7 th December 10am-4pm PERFORMANCE	

To keep things fair, unexplained/unplanned absences not related to health during their previous term will also be considered when reviewing applications.

Payment Details

The total cost of participation is **£126 (£9 per session x 14 sessions)**.

I agree to a payment of £9 a session (£126 full payment)

Payment can be paid in full via bank transfer to:

Anthos Arts

Account Number: 57329370

Sort Code: 600806

Full payment must be made by Saturday 26th October.

Please do not make any payments until your child/children's space in the group has been confirmed.

Medical Permissions/Declaration:

Anthos Arts works hard to uphold and respect **equal rights**. If you have any **special educational, dietary, and/or medical considerations** that you believe will affect the participatory nature of Anthos



Arts, and you feel are important to **declare**, please use the below box. This is so that we make sure measures are put in place and our young people are best supported during rehearsal times.

If these change, please do get in touch with us: anthos-arts@outlook.com

I hereby consent to any First Aid or medical treatment necessary to be given to my child/children during sessions. I authorise supervising staff to sign any written form of consent required by the hospital authorities if the delay in obtaining my signature is considered by the doctor to endanger my child’s health and safety.

Photos/Media

A part of Anthos Arts’ success has been our media attention. Please sign below to show that you are happy for us to photograph/video your child and that they can be a part of any media used within our publicity. Photos will not be taken/shared without parent’s permission and saying no will not affect our decision offering your child/children space in the group.

I (parents/ guardians name) _____ allow my child (child’s name) _____ to be photographed and videoed for use by Anthos Arts publicity.	<u>Parent/ guardians signature</u>
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By submitting this application, I affirm that the facts set forth in it are true and complete. I understand that if I am accepted as a member of Anthos Arts 2024, any important information that has not been disclosed is at my own liability.

Parent/Guardian(s) Name (Printed)	
Signature	
Date	

This form should be completed and returned to: applications.anthos-arts@outlook.com. If you have any difficulties submitting your form, please get in touch.

