STAGERIGHT NEWCASTLE MEMBERSHIP APPLICATION

Please complete the form and email it back to us here at [dh9digital@icloud.com](mailto:dh9digital@icloud.com) for our team to process. Once processed you will be sent an email regarding your application.

Please complete all fields honestly and accurately. (Double click in box to complete)

FULL NAME;

Date Of Birth; Gender Pronouns

Address Telephone

Email

Postcode

Describe your acting experience/ability.

What do you hope to gain from our club?

What is your preference, (TV, Stage, Script Writing, Technical, Camera etc.)

Do you have any skills/training or qualification that may benefit the club members?

Please now submit your form by email to [dh9digital@icloud.com](mailto:dh9digital@icloud.com) and our membership secretary will vet the application and get back to you. Please be aware that our club membership numbers are restricted by our public liability insurers and therefore your application may be held on record should our books be full at the time of your application.

Your personal data will not be shared with any 3rd party and will be securely store.