



APPLICATION FOR ADULT/STUDENT MEMBERSHIP

ABOUT THE CHIPSTEAD PLAYERS

Founded in 1924, the Chipstead Players have a long history of presenting plays in the village. For many years these took place in the village hall but we were fortunate to be able to buy the freehold of what is now The Courtyard Theatre and with the enthusiasm of the members, convert a dilapidated stable block into a beautiful 98 seat theatre. We opened the theatre in Spring 1995 and have since performed a wide variety of plays, usually to capacity houses.

With a current membership of around 300, we present four or five major productions a year as well as some junior productions. You will see below that there are many ways of getting involved with the Players and every contribution is valued. So that members are kept in touch, we publish a regular newsletter "Noises Off!" which details social events and auditions, and includes priority ticket application forms and updates on work to complete the theatre. Our foyer bar opens on production nights and there is also a club bar open to members on Sundays from 12 noon to 2.00 pm.

MEMBERSHIP FEES

Subscriptions are due on the **1st September** each year, but if you join on or after 1st April your subscription covers the period until the end of August the following year.

Category	Annual Subscription
Ordinary	£25.00
Senior Citizen (Over 60 and retired)	£20.00
Student over 18(in full time education)	£10.00

Please complete the details overleaf and send this application to:

Mr Don Hindle, New Members Secretary, Chipstead Players, Draycote, The Glade, Kingswood, Surrey. KT20 6JE

If you have any queries, please telephone 01737 832593.

DATA PROTECTION ACT To comply with the Data Protection Act 1984, The Chipstead Players is required to advise all members that their membership records will be held on computer. These records will be kept confidential and solely for the purpose of administration of Chipstead Players. The membership records will not be disclosed to any person outside the membership of Chipstead Players and then only to persons who need the subject information in order to carry out their duties in connection with the administration of the club. The names (but no other details) of cast members and their photos may be placed on the Chipstead Players website for publicity purposes. Your signature on the membership application form acknowledges that you accept these provisions.

CHILD PROTECTION POLICY

In order to comply with Child Protection Regulations, it is the policy of Chipstead Players to ask any adult member likely to be working with or in close proximity to junior members, to complete a DBS (Disclosure & Barring Service)* enquiry form. Your application to join Chipstead Players is taken to indicate your willingness to complete the form, in the event that the Executive Committee deem such an action appropriate.

* Formerly known as CRB (Criminal Records Bureau)



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Please consider how you may contribute to the Society by ticking your particular areas of interest

<input type="checkbox"/> ACTING	<input type="checkbox"/> COSTUME DESIGN
<input type="checkbox"/> PRODUCING	<input type="checkbox"/> COSTUME MAKING
<input type="checkbox"/> SET DESIGN	<input type="checkbox"/> MAKE-UP
<input type="checkbox"/> SET CONSTRUCTION	<input type="checkbox"/> POSTER DESIGN
<input type="checkbox"/> LIGHTING	<input type="checkbox"/> ADMINISTRATION
<input type="checkbox"/> SOUND	<input type="checkbox"/> SOCIAL EVENTS
<input type="checkbox"/> PROPERTIES	<input type="checkbox"/> MAINTENANCE OF PREMISES
<input type="checkbox"/> PLAY READINGS	<input type="checkbox"/> FRONT OF HOUSE (includes cloaks, box office, programmes, car parking etc)
<input type="checkbox"/> PROMPT	<input type="checkbox"/> BAR DUTY

Please indicate your 'acting age' ranges: 16-25 20-35 30-45 40-60 60+
and describe your previous drama related experience (if any)

Please place my name before the Executive Committee for election as a member of the Chipstead Players.
I enclose a cheque for £..... made payable to "Chipstead Players". (See table of fees overleaf)

Block letters please

TITLE: Mr/Mrs/Miss _____ FIRST NAME: _____ SURNAME: _____

ADDRESS: _____

POST CODE _____ EMAIL ADDRESS _____

TELEPHONE No: _____ OCCUPATION: _____

CATEGORY OF MEMBERSHIP (tick): Ordinary Senior Cit. Student

SIGNED: _____ DATE: _____

PROPOSED BY: _____ SECONDED BY: _____

(If you already know members of the Chipstead Players, please ask two of them to propose and second you. This is NOT essential, but may speed the consideration of your application. All applications are subject to approval by the Executive Committee).