



LIGHTS CAMERA ACTION

Address: Unit C, 149 Upper Canterbury Street, Gardens, Cape Town, South Africa
Mobile: 082 948 3533 Email: channa@lights-camera-action.co.za

LIGHTS -CAMERA -ACTION TV COMMERCIAL COURSE ENROLEMENT FORM

Student First Name: _____ Last Name: _____

Address: _____

Mobile Nr: (_____) _____ Email: _____

Whatsapp Nr: (_____) _____ Age: _____ Date of Birth: ____ / ____ / ____

Please tick course to be attended below:

Comprehensive 2 Day Acting course (Both Tuesday & Thursday)

Intermediate 1 Day acting course **Tuesday Only**

Start Date of Workshop commencement: ____ / ____ / 2022

Referred to LCA workshops by? _____

Name of your Agent (If any) : _____

Acting fields of interest (Please Tick):

TV Commercials Feature Films Stage Acting Short Film Voice Over Stills

List previous 3 jobs - confirmed on the above fields of interest:

1. _____

2. _____

3. _____

Person responsible for payment:

First Name: _____ Last Name: _____

Address: _____

Phone: (_____) _____ Cell Phone: (_____) _____

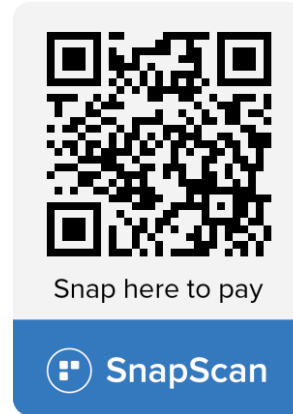
Email: _____

Method of Payment:

The total amount of workshop tuition fees is R _____. In order to secure your place in the class, a deposit of 50% of the total amount must be payable in advance. Full payment for the TV commercial acting workshop course needs to be settled 48 hours before commencement date.

Banking details:

Name of Account: Lights Camera Action CT
Branch Name: First National Bank
Branch code: 204009
Account Nr: 62592795581
Account: Current Account
Reference: Learner's name



Scan the QR code to pay.

Cancellation:

In the event that the student is unable to attend classes in terms of the dates booked and stipulated on this application, a 48 hour cancellation notification is required (from the time that classes are due to commence). This will grant the student only one opportunity to re-apply for the On-Camera Workshop within 6 months of cancellation, at no extra cost.

Should the student fail to give requisite notice within 48 hours as per the above notice, that the application monies will be withheld.

Please note: Lights Camera Action reserves the right to change, with prior notice, the course structure and/or schedule.

Disclaimer:

Lights Camera Action's directors, coaches, members, employees, agents and staff will not be held responsible for any loss, damages, actions proceedings, liability, claims, costs, injury and expenses arising out of student's attendance whilst on the premises where the course is being held.

In the event of cancellation, please contact Channa on 082 948 3533.

I hereby acknowledge that I have read and understand the contents of the above agreement.

Signed: _____ **Full Name:** _____ **Date:** ____ / ____ / ____

(Please note that we require a minimum of x5 people per course – In the unlikely event that the minimum number is not achieved for your particular course, no refunds will be given and you will be booked on the next available course).