



# LIGHTS CAMERA ACTION

Lights-Camera-Action, 15 Wandel Street, Gardens, Cape Town, South Africa  
Mobile: 082 948 3533 Email: [channa@lights-camera-action.co.za](mailto:channa@lights-camera-action.co.za) Fax: 086 243 8919

## LIGHTS -CAMERA -ACTION TV COMMERCIAL COURSE ENROLEMENT FORM

Student First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ Email: \_\_\_\_\_

Cell Phone: ( \_\_\_\_\_ ) \_\_\_\_\_ Age: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Please tick course to be attended below:

- Cape Town       Johannesburg
- Advanced 3 Week Part-time Evening course
- Intensive Weekend 2 Day course (Both Saturday & Sunday)
- Beginners / Intermediate 1 Day Course (Saturday only)
- Kid's workshop

Start Date of Workshop commencement: \_\_\_\_\_ / \_\_\_\_\_ / 2018

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: \_\_\_\_\_

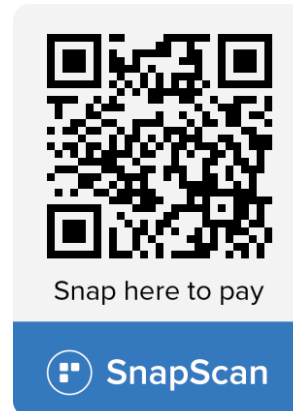
**Method of Payment:**

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.

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**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 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).*