



Ledbury Town Council

LEDBURY'S GOT TALENT AUDITION APPLICATION FORM ADULT

Auditions: Wednesday, 29 January 2025
Event: Friday, 28 February 2025
at John Masefield High School & Sixth Form Centre

PROJECT INFORMATION

This application is to apply to take part in Ledbury Town Council's Mayor's Charity event LEDBURY'S GOT TALENT at John Masefield High School & Sixth Form Centre.

Participants must take part in the live auditions on Wednesday, 29 January 2025 to get through to the talent show on Friday, 28 February 2025 (please note there are limited spaces for the final event).

Important Dates:

Auditions - Wednesday, 29 January 2025

Talent Show - Friday, 28 February 2025

**PLEASE READ ALL OF THE INFORMATION CAREFULLY
AND ENSURE THE FORM IS FULLY COMPLETED BEFORE SUBMITTING IT.**

Application deadline - **Monday, 27 January 2025 at 12 noon.**

Once completed, this form must be submitted to The Mayor's Secretary on reception@ledburytowncouncil.gov.uk or alternatively you can post it to the address below

**Ledbury Town Council Offices,
Church Lane,
Ledbury,
Herefordshire,
HR8 1DH**

AUDITION INFORMATION

Audition date: **Wednesday, 29 January 2025**

Audition Times (Under 18's): **4:15pm - 5:45pm** Adults: **6:00pm - 7:30pm**

at **John Masefield High School & Sixth Form Centre**, Mabel's Furlong, Ledbury, HR8 2HF

APPLICATION REQUIREMENTS

All applicants must be over the age of **8 years** by 28 February 2025 to apply.

ACCESS & AUDITIONS

We welcome enquires and applications from all. When filling out your application, please let us know of any disabilities or impairments. We want you to feel that you have the support you need to apply and audition.

After your application has been processed, we will contact you before the audition to find out how we can assist you.

If you have any questions in the meantime, please feel free to get in touch by email reception@ledburytowncouncil.gov.uk or ring 01531 632306

APPLICATION

Please fill in ALL information

Applicant Details *

First Name

Last Name

Age *

Address *

Street Address

Street Address Line 2

Town/City

County

Postcode

Mobile Phone Number *

Please enter a valid phone number

Home Phone Number *

Please enter a valid phone number

Email Address

example@example.com

Emergency Contact Name *

First Name Last Name

Relationship to Participant *

EMERGENCY Contact Home Phone Number *

EMERGENCY Contact Mobile Phone Number *

I give permission to be taken to hospital in the event of an emergency *

YES

NO

**Are there any medical details, conditions or dietary requirements that we should be aware of?
(Please detail below)**

Do you have a disability or impairment that would require any assistance or access requirements for your audition or during rehearsals/performances?

Are you happy for photographs of your performance to be used in press releases?

A short explanation of the talent you will be performing...

CONTACT US

If you have any queries or questions regarding your application, please contact Ledbury Town Council on the details below and we will be happy to help.

A handwritten signature in black ink, appearing to read 'Stephen Chowns', with a long horizontal flourish extending to the right.

Councillor Stephen Chowns, The Mayor of Ledbury 2024/25
Ledbury Town Council
01531 632306

Thank you for applying to audition for LEDBURY'S GOT TALENT!