

## Sport and Dance Academy Developing Elite Performance Application Form

## **Contact Details**

**Performer Details** Surname: First Name: Gender: Date of birth: School(s) attended: Which sport(s) do you wish to specialise in (please tick, you may tick several) Cricket **Dance Football** Other (please state) Parent(s) Title: Surname: First Name: Parent(s) Title: Surname: First Name: Address: Postcode: Contact Number: Email:

Past Experience	<u>e</u>				
Please tick the option)	level(s) you h	ave compete	d at (you can ti	ck more thar	one
International		Regional		Club	
National		County		School	
<u>Achievement</u>					
use the space	below to give	information	porting / dance on any achievemease continue ont	nents you fee	el are

## <u>Clubs</u>

Please list any clubs you have been a member of and include the relevant dates.

-	rsonal qualities do you have which will ensure you become successfore Sport and Dance Academy and also in wider academia?
	d for a place in the Sport and Dance Academy you will be a role mode you ensure you are a positive role model?
	you balance the demands of training and performances whilst ensurineve academic success?

Summary
Why do you wish to be considered for a position in Castle View Sport and Dance Academy?
Signature of applicants
Signature of parent:  Date:  Date:
Signature of parent:Date:

When completed this form should be returned by post to:

Mr A Marshall

Castle View Enterprise Academy

Cartwright Road, Telephone: (0191) 561 5533

Fax: (0191) 548 4417

Sunderland,

Email: enquiries@castleviewenterpriseacademy.co.uk

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