

GIVE-A-KID-A-DREAM, THE LAUREN WHEELER TRUST

APPLICATION FORM

NAME	AGE
ADDRESS	

<u>PARENT/GUARDIAN CONTACT</u>	
NAME	
TEL.MOBILE	
TEL.HOME	
<u>G.P</u>	
TEL.NO	

<u>SCHOOL/COLLEGE ATTENDING AT PRESENT</u>

<u>PLEASE LIST ALL PERFORMING ARTS CLASSES ATTENDED/STILL ATTEND</u>	<u>DATES</u>

PLEASE NOTE; THAT NOT ALL APPLICATIONS WILL BE SUCCESSFUL

WE WILL ONLY CONSIDER APPLICANTS WITHIN A 15 MILE RADIUS OF LINCOLN CITY CENTRE AT THIS TIME

PLEASE USE THIS SPACE TO TELL US MORE ABOUT YOURSELF AND YOUR DREAM OF BECOMING SUCCESSFUL IN THE PERFORMING ARTS, AND WHAT DIFFERENCE IT WOULD MAKE TO YOU IF YOU WERE TO HAVE A HELPING HAND FINANCIALLY FROM THE GAKAD TRUST

PLEASE TELL US HOW MUCH YOU NEED, AND WHY?

SIGNATURE OF PARENT/GUARDIAN	
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GIVE A KID A DREAM WILL ASSIST ALL YOUNG PEOPLE TO ACHIEVE WITHIN THE PERFORMING ARTS, GIVE ADVICE WHERE NECESSARY, HOWEVER WE WILL NOT ACCEPT ANY RESPONSIBILITY FOR ANY INDIVIDUALS WHO ARE GIVEN MONIES FROM THIS CHARITY.