

SIGN UP FOR YOUR

# Free Theatre Pass NOW!

Full Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

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

Postcode: \_\_\_\_\_

Telephone: \_\_\_\_\_

Email: \_\_\_\_\_

## What's your age?

Please tick

Parents and Guardians  
**SIGN HERE!**

0 - 11 please get this signed by a parent or guardian in order to receive your **Free Theatre Pass**. \_\_\_\_\_

As a guide under 11s should be accompanied by someone who is 16+

12 - 16 in full time education

17 - 26 please bring proof of age on your first visit

Are you:  employed  a student, (where?) \_\_\_\_\_

Have you been to York Theatre Royal before?  yes  no

Would you be happy for York Theatre Royal or the Arts Council to contact you about what's on in future?  yes  no

## How would you describe your ethnic origin?

### Asian or Asian British

- Bangladeshi
- Indian
- Pakistani

### Chinese

### White

- British
- Irish

### Black or Black British

- African
- Caribbean

### Mixed

- White & Black Caribbean
- White & Asian
- White & Black African

Other ethnic group please state \_\_\_\_\_

Do you consider yourself to have a disability?  yes  no

**HAND IN TO THE BOX OFFICE**

