**U: Dance Medway hosts the South East Regional Selection for Youth Dance England’s National Festival 2016**

**14 February 2016 – The Brook Theatre, Chatham**

**APPLICATION FORM**

THE DEADLINE FOR APPLICATIONS IS

**27 November 2015 by 4pm**

**This year’s U:Dance Medway platform is also hosting the South East Regional Selection for the National Youth Dance Festival in July 2016. Groups can chose to apply as follows;**

1. **To perform on the 14th Feb in Medway and to be considered for the National Youth Dance Festival which if you are successful would take place in July 2016.**

1. **To solely perform on the 14th Feb in Medway but to not be considered for the National Youth Dance Festival.**

If you wish to be considered for the National Youth Dance Festival, please read the South East Regional Selection Information & Guidance Notes on the South East Dance website before completing this form. Please read the form carefully and complete the sections below in black ink or type and in BLOCK CAPITALS.

To apply for U.Dance Medway you must complete this application form and submit it with a YouTube or Vimeo link to the dance piece being submitted by the deadline, all applications should be sent to **Loop Dance Company** (for full details please see the bottom of application form). We welcome applications from groups working with young disabled dancers.

There is a fee of £2 per person to attend the platform. There are limited bursaries available. Please contact South East Dance to apply.

For more information about the National Youth Dance Festival please go to [www.southeastdance.org.uk](http://www.southeastdance.org.uk) or call 01273 696844.

**GROUPS WISHING TO BE CONSIDERED FOR THE NATIONAL YOUTH DANCE FESTIVAL NEED TO FILL IN THIS BOX AND ALL SECTIONS BELOW.**

|  |
| --- |
| *U.Dance Medway 2016 is the south east regional selection event for Youth Dance England’s National Youth Dance Festival. The south east regional selection will take place at U.Dance Medway on 14 February 2016 and is optional. For more information about U.Dance and to read the application information and guidance notes, please go to* [*www.yde.org.uk*](http://www.yde.org.uk) |
| **Is your group available from 8th-10th July 2016 to attend the festival in Salford, Manchester?** |  |
| **If your group is selected to go through to the National Youth Dance Festival, how do you intend to raise the £130 per person to attend? \*read guidelines for more information** |  |
| **Have you ever applied or been selected to attend a National Youth Dance event before? If yes, when?** |  |
| **I confirm I have read the Application Guidelines produced by Youth Dance England for U.Dance 2016, available from** [**www.yde.org.uk**](http://www.yde.org.uk) |  |

**ALL GROUPS TO FILL IN EVERY SECTION BELOW**

|  |
| --- |
| *Please note that U.Dance Medway 2016 has 6 spaces available for groups* ***who do not wish*** *to take part in the south east regional selection for Youth Dance England’s National Festival.* |
| **Name of Group** |  |

|  |  |  |
| --- | --- | --- |
| **Leader Name** |  | **ADDRESS:** |
| **E-mail** |  |
| **Land Tel** |  |
| **Mobile Tel** |  | **Post Code** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Length of Dance:***Max 5 minutes* |  | **Number of Dancers:***Maximum of 20*  | Male: |
| Female: |

|  |  |
| --- | --- |
| **Age range of dancers:***\*Eligible age range for the National Youth Dance Festival selection is 11-19 or disabled dancers up to the age of 25*  | Number of 11 to 12 year olds: |
| Number of 13 to 15 year olds: |
| Number of 16 to 19 year olds: |
| Number of 20 to 25 year olds\*: |
| **Do any group leaders or dancers have any access requirements?** |  |
| **Does the group leader named have an enhanced Disclosure & Barring Service (DBS) check?** | Yes No  |
| If ‘yes please give the DBS date: |  |

|  |  |
| --- | --- |
| **Title of Dance Piece:** |  |
| **Length of piece:***Max 5 minutes*  |  |
| **Choreographer:** | Dancers  Group Leader  Invited choreographer  |
| **Style or genre of piece:** |  |
| **Title and Artist / Composer of music:** |  |
| **How are you supplying a video of your dance piece?** | *Add YouTube and Vimeo links here:* |

|  |
| --- |
| **Programme Note** please provide a couple of sentences (no more than 100 words) that will help the audience to watch e.g. main ideas / themes / stimulus for chorography: |
|  |

|  |  |
| --- | --- |
| **Would you like to receive e-communications from South East Dance?** |  |
| **Are you happy for South East Dance to share your contact information with Youth Dance England and specially selected third parties?** |  |
| **How did you hear about U.Dance 2016?** |  |

**To apply please return this form along with a YouTube or Vimeo link of the dance piece being submitted and the equal opportunities form by the deadline to:**

**info@loopdancecompany.co.uk** **or Loop Dance Company, The Brook Theatre, Old Town Hall, Chatham, ME4 4SE, T: 01634 831531**

**South East Dance & Medway Council:**

* Will not accept late applications.
* Has the right to refuse applications that do not meet all the criteria
* Along with the panel members has the final decision on all selected groups
* Has limited bursaries and will offer them on a first come first serve basis

|  |
| --- |
| I confirm that I have read and understood the platform rules and regulations. I can confirm that our group is able to pay the £2 per person for attendance fee (*unless applied for a bursary*). I can confirm that the group is available to attend U.Dance Medway on 14 February 2016. I confirm that the piece is no longer than 5 minutes. I confirm that all dancers are under the age of 19 or 25 if disabled) if applying to be considered for the National Youth Dance Festival. |
| **Print Name:** |  |
| **Signed:** |  |
| **Date:** |  |

 **Remember the deadline is 4pm on 27 November 2015**

**Equal Opportunities Monitoring Form**

**Please submit this form with your application form.**

Youth Dance England and South East Dance welcome applications from all sections of the community. You do not have to give us the following information but we would be very grateful as it will be used to monitor our success at implementing our equal opportunities policy. We will not use this information to assess your application.

This information will not be used to select groups.

|  |
| --- |
| Name of Group:…………….……………………. Number in Group:……………….Name of Leader:……… ………………………………….Date Submitted:… …………………………… |

1. Please mark the boxes that apply to your group members’ backgrounds (please enter numbers)

|  |  |
| --- | --- |
|  | Number of Members |
| White – British |  |
| White – European |  |
| Irish |  |
| Black – African |  |
| Black – Caribbean |  |
| Black – other |  |
| Indian |  |
| Pakistani |  |
| Bangladeshi |  |
| Chinese |  |
| Mixed race |  |
| Other (please specify) |  |

|  |
| --- |
|  2. Do any of your group members have a disability? How many of your group members have a disability? \_\_\_\_\_\_\_\_\_\_How many are registered disabled? \_\_\_\_\_\_\_\_\_\_ |

|  |
| --- |
|  3. Are any of your group members entitled to free school meals? How many of your group members are entitled to free school meals? \_\_\_\_\_\_\_\_\_\_ |