



APPLICATION FORM 2023
WRITER'S ROOM
at Fairycroft House

NAME OF STUDENT:

ADDRESS:

NAME OF PARENT/GUARDIAN:

CONTACT PHONE NUMBER:

E-MAIL ADDRESS:

(A) Please indicate the kind of writing you most enjoy:

Short stories – Song lyrics – Poems – Screenplays – non-fiction writing

(B) Please list your favourite books:

1. _____
2. _____
3. _____

(C) **Please attach a copy of a short story/ Song/ Script/ Poem you have written.**
(It could be something you have written in School or at Home.)

As part of the programme we may film the students at work and film them reading their stories etc. which may be published online. Please sign below to give permission.

Name:

Signature:

Date:

Creative Walden is a not for profit organization and all staff are DBS cleared

CREATIVE WALDEN, Fairycroft House, Audley Road, Saffron Walden, Essex, CB11 3HD

info@creativewalden.co.uk