

Associate Membership

Application Form

Introduction

Before you begin to complete this application form, please ensure you have read the <u>'Information and FAQs' document</u>. This includes information about eligibility and the benefits each Associate Member will receive.

Timeline

You have until **9.00am on 20 January 2025** to complete and submit your application. Late applications will not be accepted.

Interviews will take place at the Society of London Theatre (SOLT) offices at 32 Rose Street or online on Monday 27 January and Monday 3 February 2025.

If successful, your Associate Membership of SOLT will commence in March 2025 and last for 2 consecutive years.

Access requirements

If you have access requirements, please email the membership team at members@soltukt.co.uk so we can discuss and provide you with a different format of document or other appropriate support to enable you to apply. Please include a phone number if you would like a call back.

Questions

If you have any questions, please first review the <u>'Information and FAQs' document</u>. If you would like to speak to a member of the team, please email members@soltukt.co.uk.

Privacy Notice

To see how we will process and protect your personal data please see our **Privacy Notice**.

Section 1: about you

Questions marked with a * require an answer.

 What is your full legal nam 	e?*
 What is your full legal nam 	e?†

First name				
Surname				

What is your address are c	? (Please ensure	that your phone numb	er and ei
Address			
Address 2			
City/Town			
Post Code			
Country			

	Email Address
1.	You need to be 18 years of age or above to be eligible. Please tick to confirm that you are 18 or over.*
	Yes, I am 18 or over.
•	Do you have a website(s)? This could be for your organisation or a production and/or tour. Please enter all the URL addresses relevant to your application.
•	Are you involved in theatre ownership or theatrical management or theatrical production in London?*
	Yes
	□ No
'.	Are you*:
	a) a producer working independently of any SOLT member?
	Yes
	☐ No

		b) a producer employed by an organisation represented in SOLT membership (this could be a venue or a production company)?
		Yes
		☐ No
		c) employed in a non-producing role in an organisation represented in SOLT membership (this could be a venue or a production company)?
		Yes
		□ No
8.	If you	answered 'Yes' to 7 b) or 7 c), in which area is your current role?*
		Producing
		Venue programming
		Venue operating
		Administration
		General management
9.	If you	answered 'Yes' to 7 b) or 7 c), what is your current role?*

I confirm that	t the applicant is employed by:	:
which suppor	rts this application.	
I confirm that	t I am an authorised signatory	of
the above or		
Signature:		
8		
Name of sign	atory:	
o dosaviho (in	under 250 words) vous core	ou to data
e describe (iii	under 250 words) your care	er to date.

10. If you answered 'Yes' to 7 b) or 7 c), a representative of your employer organisation

_	 			
	if applicable	e) below, incl	luding name	e of product
	st your producing credits (ind % of capital raised.			st your producing credits (if applicable) below, including name

Section 2: your industry referee

14. Your referee's details.

No

Please provide the following details of a theatre professional with whom you have					
worked within the past 18 months and who has agreed that we can contact them to verify					
our application. This could be an employer, colleague, artist or collaborator.*					
Name					
Job Title / Company Name / Organisation / Theatre					
Email Address					
Phone Number					
Has this person agreed that we may contact them to verify your application?*					
Yes					

Section 3: addressing under-representation

We encourage applications from Black, Asian and ethnically diverse applicants, disabled applicants (who will be guaranteed an interview), female applicants and applicants who self-identify as originating from a low socio-economic background. Below is a series of questions which will help us identify whether you are from one or more of these groups.

15.	. What was the occupation of your main household earner when you were aged about 14? The exact profession may not be listed below, but please look at the types of jobs for each category and tick one box which best describes their main job.*			
		Modern professional & traditional professional occupations such as: teacher, nurse, physiotherapist, social worker, musician, police officer (sergeant or above), software designer, accountant, solicitor, medical practitioner, scientist, civil/mechanical engineer.		
		Senior, middle or junior managers or administrators such as: finance manager, chief executive, large business owner, office manager, retail manager, bank manager, restaurant manager, warehouse manager.		
		Clerical and intermediate occupations such as: secretary, personal assistant, call centre agent, clerical worker, nursery nurse.		
		Technical and craft occupations such as: motor mechanic, plumber, printer, electrician, gardener, train driver.		
		Routine, semi routine manual and service occupations such as: postal worker, machine operative, security guard, caretaker, farm worker, catering assistant, sales assistant, HGV driver, cleaner, porter, packer, labourer, waiter/waitress, bar staff.		
		Long-Term Unemployed (claimed Jobseeker's Allowance for a year or earlier unemployment benefit for more than a year).		

		Small business owners who employed less than 25 people such as: corner shop owners, small plumbing companies, retail shop owner, single restaurant or café owner, taxi owner, garage owner.
		Other such as: retired, this question does not apply to me, I don't know.
		Prefer not to say.
	special protect wheth inform	viding your answers to the following questions you may share with us certain all category data. Special category data is personal data that requires more ction because it is sensitive. By answering question 16 you can let us know her you consent to us collecting your special category data in this way. Further nation on how we use your data, including any special category data, is set out Privacy Notice .
16.	that for	choose 'Yes' from the options below, please proceed to answer the questions ollow. You can choose to answer 'prefer not to say' if you do not wish to le the information requested by a specific question. If you choose not to le any of this information you can select 'No' from the options below and go the tothe declaration at question 20.*
		Yes, I consent to use of my special category data in assessing my application. <u>Please</u> go to question 17.
		No, I do not wish to provide my special category data. <u>Please go to the declaration</u> at question 20.

17. How would you describe your ethnic origin?				
	Asian or British Asian - Indian			
	Asian or British Asian - Pakistani			
	Asian or British Asian - Bangladeshi			
	Asian or British Asian - Chinese			
	Asian or British Asian - Any Other Asian Background Ethnic Group (write in text box at the bottom)			
	Black or Black British - African			
	Black or Black British - Caribbean			
	Black or Black British - Any Other Black/African/Caribbean Background (write in text box at the bottom)			
	Latinx			
	Middle / Near Eastern / Arab			
	Mixed - White and Black African			
	Mixed - White and Black Caribbean			
	Mixed - White and Asian			
	Mixed - Any Other Mixed Background (write in text box at the bottom)			
	White - British (English/Welsh/Scottish/Northern Irish/British)			
	White - Irish			
	White - Gypsy or Irish Traveller			
	White - Any Other White Background (write in text box at the bottom)			
	Prefer not to say			

		Other (Please specify. For example: Mixed - Latinx and Black African or White – Italian, etc.)
18.	have a	u consider yourself to be D/deaf or disabled (where disabled means that you a medical condition that has a long-term, substantial impact on your ability to out day to day activities; for example, you may be blind or partially sighted, mobility impairments, or have epilepsy or be learning disabled)?
		Yes
		No
		Prefer not to say
19.	How v	would you describe your gender?
		Female
		Male
		Nonbinary
		Prefer not to say
		Other (please specify)

0. Your declaration: Please tick the following boxes to confirm you agree with all the below statements.*	
	I confirm that, to the best of my knowledge and belief, all the information within this form is complete and correct.
	When producing independently of any SOLT member I will adhere to the collective agreements and minimum rates of pay on any production falling within the scope of the relevant collective agreement and as set out in SOLT's Terms and Conditions of Membership (as amended from time to time).
	I will place a deposit with The Theatre Council for any production which I or an organisation with which I am associated produces in a SOLT member venue, unless exempt under SOLT's Terms and Conditions of Membership (as amended from time to time).
	I will comply with <u>SOLT's Articles of Association</u> and <u>Terms and Conditions of</u> <u>Membership</u> (as amended from time to time).
Appli	cant's signature
Name	e of signatory
Date	

How to submit your application

You have until **9.00am on 20 January 2025** to complete and submit your application. Late applications will not be accepted.

You may submit your application by email, post or hand, as follows:

- **By email:** digitally fill or scan or photograph your completed and signed application form and send it with your CV to the membership team at **members@soltukt.co.uk**
- **By post:** send a hard copy of your completed and signed application form with your CV to the membership team (c/o Livvy Perrett), SOLT, 32 Rose Street, London WC2E 9ET
- By hand: deliver a hard copy of your completed and signed application form with your CV addressed to Livvy Perrett, Society of London Theatre, 32 Rose Street, London WC2E 9ET

You will receive an email from us confirming that your application has been submitted within 2 working days.

Please check any junk email/spam folders for any correspondence before contacting us.

We will inform you about the outcome of your application. Thank you and good luck.