



P.O. Box 685
 Wilton, CT 06897
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 www.pwdbc.org
 www.with-tv.com

Summer Institute for Performing Arts 2008

The institute is a presentation of WITH-TV and the PWdBC Foundation

Application

The Institute is a one week program of immersion in the performing arts of dance, music, and theatre, culminating in a talent show and Open House highlighting the week's activities. Applicants should be people with cognitive and/or physical disabilities, 18 years or older, who exhibit skills or an interest in film and television production. The applicant should be interested in film and television as a career, as

an avocation (producing a public access program) or as a means of empowerment. **This form should be completed and returned by April 28, 2008.** It should be accompanied by your resume, two letters of recommendation, and a two minute video/DVD of yourself explaining why you want to come. All application materials become the property of PWdBC.

Applicant's Name: _____

Street Address: _____

City, State, Zip: _____

Daytime Phone: (____) _____ Evening Phone: (____) _____

Fax: (____) _____ E-Mail: _____

Circle One: MALE FEMALE Date of Birth: ____ / ____ / ____ Age by 8/1/08: _____

We will send all correspondence, invoices, and forms to the Contact Person listed below. Complete this section ONLY if the contact person is NOT the applicant.

Contact Person Name: _____

Relationship to Applicant: _____ Phone: (____) _____

Fax: (____) _____ E-Mail: _____

Street Address: _____

City, State, Zip: _____

Briefly describe your disability: _____

Briefly describe any services you receive including counseling or therapy: _____

What are your strengths, interests, or talents? _____

Why do you want to attend the Summer Institute for Performing Arts? _____

What would you like to accomplish at and through the Institute? _____

Please list any previous experiences in the performing arts: _____
