## Youth Lates: Spoken Word Workshop - Expression of Interest Form

Thank you for your interest in participating in the Youth Lates Spoken Word Workshops! Please provide the following information:

**Contact Information:**

Name:

Email:

**Parental / Guardian Consent (Required for those under 18):**

Parental/Guardian Name:

Parental / Guardian Email:

Parental / Guardian Signature:

**Eligibility:**

Please confirm you are aged between 14 – 18: Yes / No

Please confirm you are a resident of Galway City: Yes / No

**Availability:**

Please confirm your availability for **all six workshops** (Thursday evenings, 18:00 PM from May 1st , 8th , 15th, 22nd, 29th, June, 5th. and the final **showcase** on **Saturday, June 7th at Fr Burke Park** (tentative time: 17:00 PM – 18:00PM): Yes / No

**Your Interest:**

1. Why are you interested in being a part of the Youth Lates Spoken Word Workshop and this project?

(Please tell us a little about your interest in writing, poetry, or performance - no prior experience necessary!)

1. Is there anything else you'd like us to know, for example, any accessibility or support needs that would enable you to fully participate?

**Submission Information:**

Please send completed Expression of Interest to irene.murphy@youthworkgalway.ieby **Monday, 28th April.**

Thank you for your interest! We will review all submissions and be in contact with selected participants.