



**Registration Form**      Date \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Age/Grade: \_\_\_\_ / \_\_\_\_

Cell: \_\_\_\_\_ E-mail address \_\_\_\_\_

Parent/Guardian Name Printed: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_

**Please note that you are responsible for picking up your child promptly at end of class.  
If you would like your child to walk home at the end of class, please let us know.**

<u>Please indicate areas of interest</u>		
<b>Acting</b> _____	Previous Acting experience? <b>Yes No</b>	Set Design/Stage Crew? _____
<b>Singing</b> _____	Previous Singing instruction? <b>Yes No</b>	Play an instrument? _____
<b>Dancing</b> _____	Previous Dancing instruction? <b>Yes No</b>	Other?
Please list all days you will be unable to attend the workshop due to other commitments		

There may be a **Facebook Page** for this class.

- To inform our actors of rehearsal dates, times and places.
- To indicate changes to the schedule.
- To describe special events for the cast and crew.
- To place pictures taken of the cast and crew during rehearsals and performances.

This page is PRIVATE, (by invitation only). However, individuals allowed access will be able to take and share photos on their own FACEBOOK pages. We feel that this type of computer access is necessary for publicizing the program and for sharing the class with the actors' families. However, we need the approval of the parent or legal guardian indicating that you understand the nature of the FACEBOOK page and allow permission for your child's image to appear on the page.

I will allow my child's picture to appear on Facebook.  
(circle and initial) YES \_\_\_\_\_ NO \_\_\_\_\_

Health Information on reverse side...

Name \_\_\_\_\_

**Emergency Contact Information**

Emergency Contact \_\_\_\_\_ Relationship \_\_\_\_\_

Contact Phone \_\_\_\_\_

Alternate Emergency Contact \_\_\_\_\_ Rel \_\_\_\_\_

Contact Phone \_\_\_\_\_

**Medical Information**

Do you have any critical medications that you carry that we need to be aware of? (e.g. epi pen, inhaler, heart pills, etc.) YES \_\_\_\_\_ NO \_\_\_\_\_

Do you have any special precautions or limitations that we may need to be aware of?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Insurance:**

- Performing or participating in a Playhouse production is not high risk, but there is a potential of injury as in any activity in which you are involved.
- Whidbey Playhouse liability insurance at this time covers our patrons in the event of an accident or injury on Playhouse property but it does not cover our volunteers.