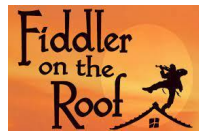




#



Name _____

Phone number _____

Email _____

T-shirt size _____ (youth) _____ (adult)

Previous theater experience:

Voice Type: ___Soprano ___ Mezzo Soprano ___ Alto ___ Tenor ___ Baritone ___ Bass

Dance Level: ___ Beginner ___ Intermediate ___ Advanced

Once on this Island Jr Roles of Interest:

Will you accept any role? **Yes** **No**

Known Conflicts (August 19 - November 5)

***Please note: No conflict zone is October 7 - November 5*

Fiddler on the Roof Roles of Interest:

**The roles of Tevye and Golde have been cast*

Will you accept any role? **Yes** **No**

Known Conflicts (March 4 - May 12)

***Please note: No conflict zone is April 13 - May 12*

Media Release

Yes ___ **No** ___ Permission is granted for me/my child to be photographed/videoed for instructional purposes.

Yes ___ **No** ___ Permission is granted for media of me/my child to be used in Sol Treasures' promotional materials including print and web media.

Consent for Minors

Parent name _____ Email _____

Phone _____ Phone(alt) _____

Emergency contact _____ Phone _____

Allergies (food, medications, etc.) _____

Other medical or behavioral conditions _____

Is the student currently taking medication? (please check one) Yes No

If yes, list medications _____

I understand that in the case of an emergency, a Sol Treasures' representative will call the parent/guardian as per the information provided and 911 to take the child to the Mee Memorial emergency room.

Parent signature _____ Date _____

Students are required to sign out of each rehearsal. Please select how your child will be signed out:

____ My child has my consent for self check out.

Sol Treasures is not responsible for child safety when leaving rehearsal if parent/guardian have signed consent for self check out.

____ My child will be signed out by a parent or otherwise approved adult. (Adult required to sign child out before child can exit the theater)

Names of persons approved by above named parent/guardian to pick up minor (sign out only):

1. Name _____ Relationship _____

2. Name _____ Relationship _____

3. Name _____ Relationship _____

Behavior Contract

Production Rules	Consequences
<ol style="list-style-type: none">1. Show respect and support for all2. Listen and follow directions3. Keep cell phone in backpack4. Be prepared and on time5. Make choices that help you and others learn	<ol style="list-style-type: none">1. Warning2. Parents are called3. Parents called and student sits out of one rehearsal <p>Please note: Students will be sent home immediately for severe disruptions or unsafe behavior. Recurring problems may result in student being dismissed from the program.</p>

I have read and understand the behavior contract. *(please sign below)*

Student _____ Parent _____