



Junior Acting Company Application

**(Fill Out One Form For Each Student. No Area Should Be Left Blank)
(Fees include a non-refundable \$50.00)**

NAME				GRADE	AGE
MAILING ADDRESS			CITY	STATE	ZIP
EMAIL (THIS IS HOW WE WILL DO MOST OF OUR COMMUNICATION)			CELL PHONE/HOME PHONE		
PARENT/GUARDIAN NAME			EMERGENCY CONTACT NAME / PHONE		

3 PEOPLE WHO CAN PICK UP YOUR CHILD (WITH PHOTO ID AT TIME OF PICK-UP)

DESIGNATED HOSPITAL

LIST ANY OF THIS STUDENT'S ALLERGIES OR MEDICAL CONDITIONS

The Junior Company includes performers in grades 6-12

The Company meets September - May

Tuesdays, 5:00-7:00pm & 1st & 3rd Sundays (except for Sept. & Jan.), 3:00-6:00pm

\$290

Has the student previously participated with Theatre Victoria's School of Performing Arts? **Yes or No**

If no, please submit a resume of previous experience.

By signing this form, I agree that my safety is primarily my own responsibility. I agree to make sure that I know how to safely participate in the Activity, and I agree to observe any rules and practices that may be employed to minimize the risk of injury. I agree to stop and seek assistance if I do not believe I can safely continue, to limit my participation to reflect my personal fitness level, and to refrain from any and all actions that would pose a hazard to myself or others.

By signing this form, I agree to allow my child to participate in Theatre Victoria's Junior Company and to release, waive, discharge, and covenant not to sue, and agree to hold Theatre Victoria & Victoria College, its trustees, officers, servants, agents, volunteers and employees from and against any and all liabilities, demands, claims, or injuries, including death, that I may sustain during or in conjunction with the Activity.

By signing this form, I authorize Theatre Victoria permission to use, print, or publish photographs for promotional and educational purposes.

PARENT/GUARDIAN SIGNATURE _____

DATE _____

OFFICE USE ONLY

REGISTRATION DATE	PAYMENT	PAID IN FULL OR MONTHLY PAYMENT	
	CASH CHECK CREDIT CARD	SEPT OCT NOV DEC JAN FEB MAR APR MAY	