

# REGISTRATION APPLICATION FORM

(PLEASE MAKE SURE ALL INFO IS LEGIBLE)

Name: \_\_\_\_\_ Circle: Male Female  
Age: \_\_\_\_ Grade: \_\_\_\_ School: \_\_\_\_\_ Teacher's Name: \_\_\_\_\_  
Name of Parent(s)/Guardian(s): \_\_\_\_\_  
Home Address: \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Home Phone \_\_\_\_\_ Actor's Cell Phone \_\_\_\_\_  
Mom's Work Phone \_\_\_\_\_ Mom's Cell Phone \_\_\_\_\_  
Dad's Work Phone \_\_\_\_\_ Dad's Cell Phone \_\_\_\_\_  
Actor's Email \_\_\_\_\_  
Parent(s) Email \_\_\_\_\_  
Actor's height/weight \_\_\_\_\_ Actor's clothing/shoe size \_\_\_\_\_

**IF YOU ATTACH A RESUME PLEASE NOTE THAT HERE. OTHERWISE, PLEASE LIST HERE AND/OR ON THE BACK OF THIS PAPER ALL YOUR PREVIOUS MUSIC/DANCE/ACTING CLASSES & EXPERIENCE. (This information may be published as biographical data in our program.)**

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**Please review the rehearsal and show schedule and list all dates you cannot attend rehearsals and/or performances. (Please be as specific as possible.)**

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**I am auditioning for the role(s) of: \_\_\_\_\_**  
**If not cast in the role(s) listed above, I (circle one) WILL / WILL NOT accept any other role.**

**I understand that when all factors are relatively equal, preference will be given to Cheverly residents and actors who have been in previous CYAG productions. I have read the rehearsal schedule, understand it, and agree to be on time and attentive for all rehearsal unless excused. I understand that unexcused absences, chronic tardiness, and/or disruptive behavior will be considered grounds for removal from the actor's part or from the production. I understand that tuition is due in full by the first rehearsal unless special arrangements are made with Treasurer/Producer Candy Watkins. I understand that if a cast member must leave or is removed from the production, a tuition refund will be prorated up to 30 days after the audition date. There will be no refunds after that date. Checks should be made payable to Cheverly Young Actors' Guild, Inc. (CYAG).**

**SIGNATURES: Actor \_\_\_\_\_ Date \_\_\_\_\_**

**Parent \_\_\_\_\_ Date \_\_\_\_\_**

# STUDENT/ACTOR WAIVER FORM

**PLEASE NOTE: THIS FORM MUST BE COMPLETED IN ITS ENTIRETY AND SIGNED BY THE PARENT IN ORDER FOR THE ACTOR TO PARTICIPATE IN THE CHEVERLY YOUNG ACTORS' GUILD THEATER TRAINING PROGRAM.**

## *General Information*

Name: \_\_\_\_\_ Circle: Male Female  
Age: \_\_\_\_ Grade: \_\_\_\_ School: \_\_\_\_\_ Teacher's Name: \_\_\_\_\_  
Name of Parent(s)/Guardian(s): \_\_\_\_\_  
Home Address: \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Home Phone \_\_\_\_\_ Actor's Cell Phone \_\_\_\_\_  
Mom's Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
Dad's Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
Actor's Email \_\_\_\_\_  
Parent(s) Email \_\_\_\_\_

## *Medical Information*

Health Plan/Insurance Company \_\_\_\_\_ Policy # \_\_\_\_\_  
Pertinent Medical Information (allergies, medication, injuries, etc.)  
\_\_\_\_\_  
\_\_\_\_\_

## *Emergency contacts*

Name \_\_\_\_\_ Home Phone \_\_\_\_\_  
Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_  
  
Name \_\_\_\_\_ Home Phone \_\_\_\_\_  
Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

I/We, the undersigned, parent(s) of the above-named student (the "Child"), hereby consent to the participation of the Child, in the Cheverly Young Actors' Guild Training Program (the "Event") sponsored by the Cheverly Young Actors' Guild (the "Presenter").

I/We hereby irrevocably consent to and authorize the use and reproduction by the Presenter of any and all photographs, recordings, videotapes and/or other reproductions of likenesses of the Child's person or characteristics ("reproductions") which have been secured by or for the Presenter, for any purpose whatsoever without compensation to the Child. I/We authorize the Presenter or others authorized by it, to exhibit, broadcast, and/or distribute or otherwise further reproduce and said reproductions in whole in part over or in any medium whatsoever, including, without implied limitation, newsletters, radio, newspapers, closed circuit television, film, cable, and television, with or without compensation in perpetuity. I/We also release, discharge, and agree to hold harmless the producers or any persons, or entities, action under their permission or authority from any liability arising from the use of said reproductions.

I/We acknowledge and agree that I/We will be responsible for transporting the Child to and from all Event sites to participate in the Event. I/We further discharge and release the Cheverly Young Actors' Guild and its trustees, officers, employees and volunteers from any and all liability for injury, loss, damage, obligation, expense, or penalty sustained by the Child arising out of or in connection with the Child's participation in the Event.

In the event that any serious injury shall occur involving the Child, I wish for the Cheverly Young Actors' Guild supervisory personnel to take appropriate steps to notify me immediately, but if I am inaccessible for any reason, I authorize whatever medical attention is deemed appropriate for the Child.

**SIGNATURE** \_\_\_\_\_ **DATE** \_\_\_\_\_  
**PARENT/GUARDIAN(S)**

## SCHEDULE AND TUITION INFORMATION

### REHEARSAL INFORMATION:

Rehearsals will take place on **Tuesday & Thursday evenings from 6:30-9pm and on Saturdays from 12:30 pm to 5:30 pm at the Cheverly United Methodist Church.** For the first 4-6 weeks, everyone must attend each rehearsal. Once roles are selected, you will be told which rehearsals your role must attend. Rehearsals *will not* be held during spring break (3/29 to 4/03/10). We will return to rehearsals Tuesday, April 6th.

### SCHEDULE AT THE PUBLICK PLAYHOUSE

*\*Performance order of casts to be determined.*

Sunday, May 09	Load-in (Time to be announced)
Monday, May 10	Tech Night (Production & Tech crew only)
Tuesday, May 11	Dress rehearsal for first cast
Weds, May 12	Dress rehearsal for second cast
Thursday, May 13	Field Trip Performance 10:30 a.m. Public Performance 7:30 p.m.
Friday, May 14	Field Trip Performance 10:30 a.m. Public Performance 7:30 p.m.
Saturday, May 15	Public Performance 2 p.m. Public Performance 7:30 p.m.
Sunday, May 16	Public Performance 2 p.m. Public Performance 6:30 p.m.

*Following the last performance, all actors and crew are expected to stay for Greenroom Clean-up and **STRIKE\*** (Theater term for taking down the set.)*

*\*Parents please note times for **LOAD-IN** and **STRIKE**. We'll need your help at these times since only those 12 and older are able to help due to Publick Playhouse guidelines. We will need help from parents during the field trip performances.*

**PLEASE BRING A LIST OF YOUR SCHEDULE CONFLICTS TO THE AUDITION. AN ACTOR CAN LOSE A ROLE IF CONFLICTS ARE GIVEN AFTER THE AUDITION DATE.**

## TUITION

This is a tuition based workshop production for students ages 8 to 18.

Main Roles: Tuition is \$300 (All inclusive).

Chorus/Ensemble Roles: Tuition is \$275 (All inclusive). There is a reduction in tuition for of \$50 per sibling.

**Full tuition must be received by the first rehearsal unless special arrangements have been made with our treasurer, Candy Watkins. You can contact her at 301-773-2253.** If payment is made later than the second rehearsal, without special arrangements, there will be a late fee of \$25.00 for each week that payment is not made or if arrangements have not been made with the treasurer.

**There are several partial scholarships available that will be issued according to financial need.** Once an actor is cast, parents may contact Candy Watkins to make arrangements for the scholarship. \*In terms of the preference for PG County kids: In casting, when all factors are relatively equal, first priority will be given to Prince George's County children and to children who have been in previous CYAG productions.