



SUMMER YOUTH THEATRE PROGRAM REGISTRATION

Student's Name _____ Age ____ Grade ____

School Attended Last Year _____

Address _____

Phone _____ E-Mail _____

Important – Information and updates will be communicated via E-Mail

Parent's Names _____

Parent Contact _____

Phone Number where someone can be reached during program hours: _____

Please read the following carefully:

The class will meet Monday through Friday from 8:00 a.m. to Noon. The Class will start on May 31. The first weeks we will meet at West Valley High School. The performances will be at the Ramona Bowl on June 20, 21, 27 and 28. The auditions will be Saturday May 14th at 8:00 a.m. at West Valley High School's Choir Room.

REGISTRATION FEE IS NON-REFUNDABLE.

1. The registration fee for the summer youth program is \$50 and must be paid before the student will be allowed to audition. Please make checks payable to Ramona Bowl Amphitheatre.
2. There is a \$45 costume rental fee that is due by the first day of the actual class. (Costume fee is non-refundable.)
3. Every student will be expected to sell \$65 in ads or sponsors in the memory book. (If a student sells more than \$65 in ads or sponsors by the deadline the additional money can be applied to the costume rental) All ads and sponsors will be due by the Monday of the second week of the program. If the ads or sponsors are not turned in the management is not responsible if they are left out of the book.
4. All costumes must be returned following the final performance. If any pieces are missing or damaged the student will be charged whatever the rental company charges us.
5. All students will be expected to sell at least 10 tickets to the show.
6. Rehearsals begin at 8:00 a.m. and end at Noon. All students need to be **on time** and be picked up promptly. Transportation will be provided by parent/guardian to and from all rehearsals and performances. Rehearsals are mandatory and students may be dropped if they do not attend. As the parent/guardian I will notify the Artistic Director of any absence of my son/daughter for any excusable reason. **I am aware supervision will not be provided before or after rehearsals.**

7. Each student will be given one copy of the script. It needs to be brought every day to rehearsal. If it is lost there will be a \$15 replacement fee.
8. Students will be responsible for providing their own shoes and stockings. Those will not be rented.
9. Children who are cast must be physically able to perform duties as required for the role.
10. The Ramona Bowl Amphitheatre has a zero tolerance policy for smoking, alcohol, drugs and weapons.
11. My child will abide by all rules and regulations set forth by Ramona Bowl Amphitheatre, Staff and its Summer Youth Theatre Program Artistic Director. We are agreeing to the use of any photo or video of my child to be used in publicity or promotion. All images are the property of the Ramona Bowl. Students may be dropped from the Summer Youth Program for disciplinary actions after (1) warning. No refunds of monies paid for the program will be given.

Medical Emergency Form:

In an emergency, if parent is not available, contact:

Name _____ Home Phone _____

Work Phone _____ Cell Phone _____

Allergies (food or drugs) _____

Name of Family Doctor _____ Phone _____

Parent's Authorization for Medical Treatment:

I give my permission to the physician selected by the program directors to order x-rays, routine tests and treatment for the health of my child, in the event I cannot be reached in an emergency, I hereby give my permission to the physician selected by the directors or producer to hospitalize, secure treatment for and to order injections and/or surgery for my child as named on this form.

Name _____ Relationship _____

Signature _____ Date _____

Parent and Child Participation Agreement

By signing and submitting this application you are agreeing to the policy guidelines as listed on this form. This application is valid ONLY if signed by parent and child.

Parent/Guardian _____ Date _____

Child _____ Date _____