

REGISTRATION FORM

THE WIZARD OF OZ

February 14, 2025 - May 17, 2025

Please print clearly

CHILD'S NAME:	
PARENT'S NAME:	
AGE: GRADE: SCHOOL:	
HOME ADDRESS:	
PHONE NUMBERS: (PRIMARY)	(SECONDARY)
PHONE NUMBERS: (PRIMARY) E-MAIL ADDRESS: (PRIMARY)	(SECONDARY)
CHILD'S EMAIL: (IF APPLICABLE)	
MEDICAL CONDITIONS:	
EXPERIENCE: (list most recent)	
Γ-SHIRT SIZE: Specify Youth or Adult (YS, YM, YL	, AS, AM, etc.) COLOR: <u>Black White Pink Green Blue</u>
MAKE CHECKS* PAYABLE TO CHILDREN FOR THE WAIVER AND REL CHILDREN FOR COMMAN, IN 1338 WESTLAK NAPLES, 239-57 seetishrun1@aol.com or tpoor PARTICIPATION IF FOR ANY REASON YOU WITHDRAW YOUR OR REGARDLESS OF HOW MANY REHEARSALS OF THE PARTICIPATION FEE IS NON-REFUNDABLE IN PART, TO ANY OTHER PRODUCTION OF IMMEDIATE FAMILY MEMBER (Brother/Sister).	EASE AGREEMENT TO: OR THE ARTS PROGRAM DIRECTOR E BOULEVARD FL 34103 1-3305 rman@childrenforthearts.com ON FEE POLICY CHILD FROM THE PRODUCTION AT ANY TIME, THEY HAVE ATTENDED, OR NOT ATTENDED, LE AND NON-TRANSFERABLE, IN WHOLE OR OR ANY OTHER PERSON OTHER THAN AN TRANSFERRING THE PARTICIPATION FEE TO AMILY IS ONLY TOWARDS THE CURRENT
	CHARGED A \$35 SERVICE FEE.
	ND AND AGREE TO THESE TERMS.
DI SIGNING DELOW, I UNDERSTA	TO AND AGREE TO THESE TERMS.
PARENT SIGNATURE	DATE
*Payments may also be made via Ze	lle to 239-571-3305 or

CHECK #:

Venmo: @Tish-Poorman - When using Venmo

please put your child's name ONLY in the memo



Waiver and Release Agreement

CHILDREN FOR THE ARTS FOUNDATION, INC. hereinafter referred to as CHILDREN FOR THE ARTS Organizer:

THEATRE PRODUCTION Event:

Date

*PARENT/GI	JARDIAN	MUST S	SIGN TH	IIS WA	IVER T	O HAV	/E THEI	R CHIL	.D/CHILI	DREN	PARTIC	IPATE
IN CHILDRE	N FOR TH	HE ARTS	THEAT	RE PR	ODUCT	ION. P	LEASE	READ (CAREFU	JLLY E	BEFORE	SIGN-
ING *												

<u> </u>	(parent name) have chosen to have my
child/children, participate in Children For The Arts Theatre Production child will be participating in and acknowledge that my charticipating in the activities. I understand that Children ing such a determination and does not provide health gram.	n. I understand the nature of the activities that my ild is in the proper physical condition and capable of For The Arts is not in any way responsible for mak-
In consideration of my child's participation in Children Foto voluntarily assume all risks known and unknown of ilimited to Covid-19, and/or any contagious diseases, ho Arts, its entities, directors, owners, agents, employees, to the fullest extent of the law. It is my express intent deemed as a hold harmless agreement, discharge and on behalf of myself and my child to release and hold har costs and expenses arising in connection with any activity on the premises during the course of my child's injuries, loss, or harm that occur during the activity or are	injuries or illnesses of any nature, including but not wever caused, and hold harmless Children For The volunteers and personnel (collectively "Releasees) that this Waiver and Release Agreement shall be covenant not to sue Children For The Arts. I agree mless Releasees from any and all claims, liabilities, vity during rehearsals and performances or anytime participation in Children For The Arts including any
I authorize and agree that Children For The Arts may needed for advertising, social media, public relations at the same will not be compensated for the same.	
MY SIGNATURE IS PROOF THAT I HAVE READ AND ER AND RELEASE. I UNDERSTAND THIS CONTRACT SIGN IT ON MY OWN FREE WILL. MY SIGNATURE COMPLETE AND UNCONDITIONAL WAIVER AND RETENT OF THE LAW.	CT AFFECTS MY LEGAL RIGHTS, AND HEREBY IS PROOF OF MY INTENTION TO EXECUTE A
Print name of Child/Children	
Print name of Parent or Guardian	Signature of Parent or Guardian



REHEARSAL & PERFORMANCE SCHEDULE – THE WIZARD OF OZ FEBRUARY 14, 2025 – MAY 17, 2025 FRIDAYS 4:30pm-7:00pm (plus extra Thursday rehearsals)

REHEARSALS FROM 2/14/25 – 5/09/25 WILL BE HELD AT

BARRON COLLIER HIGH SCHOOL ORCHESTRA ROOM #205

02/14	AUDITIONS - BCHS - Room #205
02/21	REHEARSAL - BCHS - Room #205
02/28	REHEARSAL - BCHS - Room #205
03/07	REHEARSAL - BCHS - Room #205
03/14	NO REHEARSAL – SPRING BREAK
03/21	REHEARSAL - BCHS - Room #205
03/28	REHEARSAL - BCHS - Room #205
04/03	THURSDAY REHEARSAL - BCHS - Room #205
04/04	REHEARSAL – BCHS – Room #205
04/11	REHEARSAL - BCHS - Room #205
04/17	THURSDAY REHEARSAL - BCHS - Room #205
04/18	NO REHEARSAL
04/25	REHEARSAL - BCHS - Room #205
05/01	THURSDAY REHEARSAL - BCHS - Room #205
05/02	REHEARSAL – BCHS – Room #205
05/08	THURSDAY REHEARSAL - BCHS - Room #205
05/09	REHEARSAL – BCHS – Room #205

TECH WEEK:

05/12 MONDAY TECH REHEARSAL – Stage – ST. JOHN'S
05/13 TUESDAY TECH REHEARSAL – Stage – ST. JOHN'S
05/14 WEDNESDAY DRESS REHEARSAL – Stage – ST. JOHN'S

PERFORMANCES:

05/15 THURSDAY PERFORMANCE – 6:30pm – Stage – ST. JOHN'S 05/16 FRIDAY PERFORMANCE – 6:30pm – Stage – ST. JOHN'S 05/17 SATURDAY PERFORMANCE – 1:00pm – Stage – ST. JOHN'S

OUR CAST PARTY WILL BE HELD DIRECTLY FOLLOWING SATURDAY'S PERFORMANCE IN THE PULTE CENTER CAFÉ AT ST. JOHN'S.

REHEARSALS WILL BE HELD AT BARRON COLLIER HIGH SCHOOL IN THE ORCHESTRA ROOM (#205) UNTIL WE MOUNT THE SHOW ON STAGE IN THE AUDITORIUM AT THE PULTE CENTER AT ST. JOHN'S. PLEASE BE COURTEOUS AND DO NOT ENTER THE ORCHESTRA ROOM/AUDITORIUM DURING REHEARSALS UNLESS IT IS AN EMERGENCY. EVERYONE WILL BE DISMISSED AT THE SAME TIME AND WE ASK THAT YOU WAIT OUTSIDE THE MAIN ENTRANCE OF BARRON COLLIER HIGH SCHOOL/THE PULTE CENTER PRIOR TO DISMISSAL. IF ANY ACTOR NEEDS TO LEAVE EARLY OR IS GOING TO BE ABSENT FROM REHEARSAL, PLEASE INFORM TISH POORMAN, PRODUCTION DIRECTOR, BY EMAIL AT: SEETISHRUN1@AOL.COM OR TISHPOORMAN@GMAIL.COM



PRODUCTION INFORMATION AND POLICIES

AUDITIONS: Auditions are held the first day of the production. Auditions begin with those that have prepared a 30-second a cappella song. Children do not have to audition with a song if they prefer not to. Line readings for roles are held following vocal auditions. Casting will be announced at the end of auditions. Roles will not be given out to those who have not registered prior to auditions.

CASTING: It takes an ensemble to make a show and everyone's part is important to the outcome of the production. We value each and every child equally and have chosen their role with careful consideration in the casting process. The objective of this production is to not only put on an extraordinary performance, but to make friends and have fun.

MARK YOUR CALENDAR: Our rehearsal schedule is attached. If there is a conflict and your child cannot attend certain dates please inform the Program Director, Tish Poorman.

CANCELLATION & PARTICIPATION FEE POLICY: If for any reason you withdraw (cancel) your child from the production at any time, regardless of how many rehearsals they have attended, or not attended, the participation fee is non-refundable and non-transferable, in whole or in part, to any other production or any other person other than an immediate family member (brother/sister). Transferring the participation fee to another child in your immediate family is only towards the current production and no other production.

RETURN CHECK POLICY: Returned checks will be charged a \$35 service fee.

LATE PICKUP FEE: Rehearsals end at 7:00pm. After 7:00pm, a late fee will be charged at the rate of \$10.00 for each 10 minute interval or fraction thereof.

OTHER INFORMATION:

- Children must wear closed toe shoes and comfortable clothing.
- Bring the script and a pencil to every rehearsal.
- No food or drink is allowed (except water) in the theater during rehearsals.
- Parents must wait for their children to be dismissed and may not attend auditions or rehearsals so that all focus can be put into the production.
- Have fun!