

# Newberry Community Players

## Children's Workshops

### Young Players Info:

Name \_\_\_\_\_

Age \_\_\_\_\_ School \_\_\_\_\_

Do you have previous theater experience? Yes \_\_\_ No \_\_\_ (If Yes, what?)

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Do you have previous dance experience? Yes \_\_\_ No \_\_\_ (If Yes, what?)

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Do you have previous singing experience? Yes \_\_\_ No \_\_\_ (If Yes, what?)

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Do you play an instrument? Yes \_\_\_ No \_\_\_ (If Yes, what instrument and what experience?)

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List any conflicts you might have with the workshop schedule

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### Parent/Guardian Info:

Name(s): \_\_\_\_\_

Mailing Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell/Work Phone \_\_\_\_\_

E-mail \_\_\_\_\_

Would you be interested in being a parent volunteer for the workshops? Yes \_\_\_ No \_\_\_

I understand the importance of my child being at each Saturday's workshop. I understand I am to contact the director of any planned or unplanned absences. I agree to hold the Newberry Community Players, The Ritz Theater, and the NCP board harmless from any potential litigation. I hereby authorize the leaders of the NCP Children's Workshop to give consent for any and all necessary emergency medical and First Aid for my child (listed above) while said child is in said individual's custody.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Total Amount Due \_\_\_\_\_ (Non-Refundable)

Payment Amount \_\_\_\_\_ Date \_\_\_\_\_

Cash \_\_\_\_\_ Check # \_\_\_\_\_

NCP Board Member Initials \_\_\_\_\_