

Woodland Theatre



RELEASE OF LIABILITY AND PHOTO RELEASE FORM

RELEASE OF LIABILITY

Woodland Theatre Productions does its utmost to ensure that health and safety of its participants.

Parents of minor children participating in WTP productions are advised to be mindful of the fact that performance in (and rehearsing for) live theatre has the potential for risk of danger (including, but not limited to, use of costumes, use of stage props, use of sets, use of stage special effects, etc.)

I, _____ acknowledge that my participation in this production is voluntary. I acknowledge that I have been advised of the potential dangers of performance in live theatre. After deliberation, I elect to voluntarily participate in this production, and to heed the explicit instructions given to me with regard of safety and procedure in the rehearsal hall/performance venue. I agree to hold harmless (and waive any claim or action against) Woodland Theatre Productions, its agents, board, directors, producers, and staff from any liability, fault or action arising from participation in this production.

Company Member's Signature:

Date

Parent/Guardian Signature of Minor:

Date

PHOTO RELEASE

I, _____, authorize WTP and all of its agents, contractors, employees, and volunteers to use, at their discretion my (or my child's) name and likeness, in any medium (including, but not limited to, video, photographs, drawings, etc.) for the purpose of advertising WTP and/or this production, without notice or compensation to me (or my minor child), now and in the future.

Company Member's Signature:

Date

Parent/Guardian Signature of a Minor:

Date

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MEDICAL RELEASE FORM

Name of Cast Member: _____ Birth Date: _____ Age: _____

Address: _____
Address number _____ City _____ Zip Code _____

Home Phone _____ Cell Phone _____

Work Phone _____ Email _____

If under 18 years of age, fill out the following information for parent/guardian

Father/Guardian Name _____

_____ Mailing Address _____ City _____ Zip Code _____

Home Phone _____ Cell Phone _____

Work Phone _____ Email _____

Mother/Guardian Name _____

_____ Mailing Address _____ City _____ Zip Code _____

Home Phone _____ Cell Phone _____

Work Phone _____ Email _____

Insurance Provider: _____

Insurance Policy #: _____ Phone _____

Doctor _____

Phone _____

EMERGENCY CONTACT NAME &

PHONE _____

Cast members under the age of 18: In the event, your child is injured or an emergency occurs, WTP will make every effort to reach you. If you cannot be reached, WTP will try to reach your emergency contact. If possible, WTP will call your designated doctor. However, if deemed necessary because of the nature of the injury or emergency, WTP will obtain treatment.

Cast members age 18 +: In the event you are injured or an emergency occurs, WTP will make every effort to reach your emergency contact. If possible, WTP will call your designated doctor. However, if deemed necessary because of the nature of the injury or emergency, WTP will obtain treatment from the nearest hospital.

Please sign below to give permission to obtain medical assistance as described above in the event of an injury or emergency.

Company Member's Signature: _____ Date _____

Parent/Guardian Signature of a Minor: _____ Date _____

WOODLAND COMMUNITY THEATRE AUDITION APPLICATION FORM

Please return this form to the front desk. Take your number and have your picture taken. Then report to the theatre. Please DO NOT go on the stage until you are asked.

PLEASE PRINT CLEARLY

NAME _____ MALE ___ FEMALE ___

Age _____ Date of Birth: _____

ADDRESS _____

PHONE NUMBER(S): HOME: _____ CELL: _____

EMAIL: _____

PARENTS'/GUARDIANS' NAME(S) _____

HEIGHT: _____ WEIGHT _____ HAIR COLOR _____ EYE COLOR _____

Please note if sizes are children or adult:

PANT/SKIRT SIZE _____ SHIRT SIZE _____ SHOE SIZE _____

If you have a résumé, attach it to this form. If not, please fill in your theatre experience on the reverse.

ROLES:

When you audition, you are agreeing that you are willing to play ANY ROLE in the script. However, feel free to list the roles that are most appealing to you.

The Equal-opportunity, Non-traditional Casting policy

This policy means that anyone is welcome to audition for **all** roles. Unless it is important to the script, factors such as age, race or physical capability are not considered when making casting decisions. All roles for Woodland Productions are open to people of all backgrounds and physical-capabilities. It is our policy to cast everyone in the production whose audition shows that he/she was motivated enough to *prepare properly* for the audition. The director and staff does their best to cast people who create a character closest to their vision of the character.

RESUMÉ OF THEATRICAL EXPERIENCE:

<i>Production</i>	<i>Role/Crew</i>	<i>School/Theatre Group</i>	<i>Dates</i>

THEATRE CLASSES / WORKSHOPS:

SINGING CLASSES/WORKSHOPS:

DANCE – GYMNASTIC- CLASSES & WORKSHOPS:

OTHER TALENTS AND ABILITIES:

Please list any dates and times your child will not be available to rehearse or perform from May 6th through July 23rd.

Woodland Community Theatre Parental Consent Form

A participant under the age of 18 must have parental consent to participate in Woodland Community Theatre productions. This form must be completed, signed and returned to Little Mermaid JR production staff.

Name of Child Date of Birth

Name of Parent/Guardian(s)

Address:.....

Tel (day): Tel (evening).....

Mobile: E-mail:

Does your child have any medical issues we should be made aware of (allergies, etc.)?

.....
Does your child need to take medication for above medical issues while in rehearsals or performances or on an as needed basis (inhalers, epi pen, etc.)?

.....
Emergency contact details: (please list additional contact other than above if possible)

Name: Tel.....

Relationship to child:

CONSENT (please read carefully)

- a) I agree to my child taking part in Woodland Community Theatre production
- b) I agree to allow Woodland Community Theatre to contact the closest medical official in the event of an emergency. I understand that this is in the best interest and safety of my child.
- c) I understand that Woodland Community Theatre and its affiliates, accept no responsibility for loss, damage or injury caused by or during attendance at any of the rehearsals or performances.
- d) For safety purposes, the child will adhere to all rules and regulations set forth by the production staff.

Woodland Community Theater and its Board Members or affiliates will not be held liable for any form of injury (physical and emotional), including death.

This contract is binding until membership is terminated.

Signed (Parent/Guardian) Date:.....