



Fall 2013

PLEASE COMPLETE AND RETURN
REGISTRATION FORM TO:
MARY D'AMICO, DIRECTOR
YOUNG ACTORS GUILD
RU 3702, 110 8TH ST.
TROY, NY 12180
(518) 276-6505



Based on the Children's Book,
Yes, Virginia There is A Santa Claus!
Dec. 6, 7, 8

Classes take place on Saturdays, September 21 - December 7, from 9:30am - 12:30pm.
NO CLASS on the Weekends of Oct. 12th or Nov. 23

Winter Follies

Our Annual Original Works Fall Show
Ages 14 - up, December 13, 14

- CENTER STAGE (Includes Classes and Show) -----\$400.00**
(Rehearsals will be on Saturday afternoon's immediately following classes a separate rehearsal schedule will be sent home the first week of YAG.) No rehearsals October 12 or November 23. (Students over 14 may participate in both productions.)
- BACK STAGE-CLASSES ONLY- -----\$300.00**
Classes take place from 9:30 - 12:30 Saturday Mornings - No class October 12 or November 23
- On Stage Only-NEW! -----'Yes Virginia, there is a Santa Claus!'-----\$230.00**
Rehearsals will take place on Saturday afternoons from 1 - 3pm. (No rehearsals October 12 or November 23)
- Private Guitar Lessons -10 classes taught by Will Brown, Local Musician-----\$200.00**
Guitar lessons - Will tailors his guitar lessons around his students' interests. Using those interests, Will balances the lessons with helpful suggestions and guidance to help his students succeed as guitarists while developing their own musicianship in a fun environment.

Main Stage Show Dates are December 6 & 7 @7:30PM, and December 8th @ 2pm

\$100 Non-Refundable deposit is due with registration.
Center Stage: Next \$150.00 due by October 15th, and last \$150 due by November 15th
Back Stage: Next \$100 due by October 15th, and last \$100 due by November 15th.
On Stage Only Next \$130 due by November 15th
Guitar Lessons - Next \$100 due by Novmeber 15th

STUDENT'S NAME _____ AGE _____

DATE OF BIRTH____/____/____ SCHOOL_____ CURRENT GRADE _____

PARENT'S NAME _____ PARENT'S EMAIL _____

STREET ADDRESS _____

CITY _____ ZIP _____

HOME PHONE _____ WORK PHONE _____

IT IS IMPORTANT TO THE ENTIRE CAST AND STAFF THAT THE STUDENT PARTICIPATES IN **ALL WEEKS OF THE PROGRAM.**
If you are aware of any days that your child will not be able to attend the program, please list them below:

IF YOU BECOME AWARE OF ANY NECESSARY ABSENCES, PLEASE INFORM US BY CALLING 276-2364 AND LEAVE A VOICE MAIL

IF A STUDENT MISSES 3 REHEARSALS THEY WILL NOT BE ABLE TO PARTICIPATE IN THE PRODUCTION.

IN CASE OF AN EMERGENCY:

CONTACT _____

PHONE _____

FAMILY DOCTOR _____

DOCTOR'S ADDRESS _____

List all allergies _____

List all medications being taken _____

List all medical problems of which we should be made aware _____

I give permission to Young Actors Guild staff to consent to medical treatment/healthcare services without limitation, on behalf of my/our child/children in my/our stead as may be deemed necessary, proper or prudent in the discretion of said agent, employee and/or chaperone.

Insurance Provider _____ **ID#** _____

MEDIA RELEASE

In consideration of value received, the receipt of which is hereby acknowledged, I hereby give RENSSELAER POLYTECHNIC INSTITUTE, its legal representatives and assigns, and those acting with permission of Rensselaer Polytechnic Institute or employees of Rensselaer Polytechnic Institute, the right and permission to copy write and/or use, reuse and/or broadcast and republish still photographs, motions pictures, digital media, videotapes and/or associated or independent audio recordings of me, on reproductions thereof in color, or black and white made through any media, for any purpose whatsoever, including the use of any printed matter in conjunction therewith. I hereby waive any right to inspect or approve the finished still photographs, motion pictures, digital media, videotapes, and/or associated or independent audio recordings, or advertising copy or printed matter that may be used in conjunction therewith or to the eventual use that it might be applied. I hereby release, discharge and agree to save harmless Rensselaer Polytechnic Institute, its representatives, assigns, employees or any person or persons, corporation or corporations, acting under its permission or authority, or any person, persons, corporation or corporations, for whom it might be acting, including any firm publishing and/or distributing the finished product, in whole or in part, from and against any liability as a result of any distortion, blurring or alteration, optical illusion, or use in composite form, either intentionally or otherwise, that may occur or be produced in the taking, processing or reproduction of the finished product, its publication, distribution or broadcast. As parent of this student, I join in and agree to be bound by this release/hold harmless document.

I understand and accept the above information.

Parent/Guardian's Signature _____ Date _____

Student's Signature _____ Date _____

PAYMENT

- Check or money order enclosed – payable to RPI Young Actors Guild
- Visa or MasterCard (For your security credit card payments must be phoned in to Heather Showers at 518-276-6505.)