



# REGISTRATION FORM

SEUSSICAL KIDS

August 16, 2024 - October 26, 2024

Please print clearly

CHILD'S NAME: \_\_\_\_\_

PARENT'S NAME: \_\_\_\_\_

AGE: \_\_\_\_\_ GRADE: \_\_\_\_\_ SCHOOL: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE NUMBERS: (PRIMARY) \_\_\_\_\_ (SECONDARY) \_\_\_\_\_

E-MAIL ADDRESS: (PRIMARY) \_\_\_\_\_ (SECONDARY) \_\_\_\_\_

CHILD'S EMAIL: (IF APPLICABLE) \_\_\_\_\_

MEDICAL CONDITIONS: \_\_\_\_\_

EXPERIENCE: (list most recent) \_\_\_\_\_

T-SHIRT SIZE: \_\_\_\_\_ Specify Youth or Adult (YS, YM, YL, AS, AM, etc.) COLOR: Black White Pink Blue

**\$335 PARTICIPATION FEE IS DUE ALONG WITH THIS REGISTRATION FORM.  
MAKE CHECKS\* PAYABLE TO **CHILDREN FOR THE ARTS** AND RETURN ALONG WITH  
THE WAIVER AND RELEASE AGREEMENT TO:**

CHILDREN FOR THE ARTS  
C/O TISH POORMAN, PROGRAM DIRECTOR  
1338 WESTLAKE BOULEVARD  
NAPLES, FL 34103  
239-571-3305  
seetishrun1@aol.com or tpoorman@childrenforthearts.com

### PARTICIPATION FEE POLICY

IF FOR ANY REASON YOU WITHDRAW 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.

RETURNED CHECKS WILL BE CHARGED A \$35 SERVICE FEE.

**BY SIGNING BELOW, I UNDERSTAND AND AGREE TO THESE TERMS.**

PARENT SIGNATURE \_\_\_\_\_

DATE \_\_\_\_\_

*\*Payments may also be made via Zelle to 239-571-3305 or Venmo: @Tish-Poorman - When using Venmo please put your child's name ONLY in the memo section.*

CHECK #: \_\_\_\_\_



## Waiver and Release Agreement

**Organizer:** CHILDREN FOR THE ARTS FOUNDATION, INC.  
hereinafter referred to as CHILDREN FOR THE ARTS  
**Event:** THEATRE PRODUCTION

**\*PARENT/GUARDIAN MUST SIGN THIS WAIVER TO HAVE THEIR CHILD/CHILDREN PARTICIPATE IN CHILDREN FOR THE ARTS THEATRE PRODUCTION. PLEASE READ CAREFULLY BEFORE SIGNING.\***

I, \_\_\_\_\_ (*parent name*) have chosen to have my child/children, \_\_\_\_\_ participate in Children For The Arts Theatre Production. I understand the nature of the activities that my child will be participating in and acknowledge that my child is in the proper physical condition and capable of participating in the activities. I understand that Children For The Arts is not in any way responsible for making such a determination and does not provide health insurance for those participating in its theatre program.

In consideration of my child's participation in Children For The Arts, I agree on behalf of myself and my child to voluntarily assume all risks known and unknown of injuries or illnesses of any nature, including but not limited to Covid-19, and/or any contagious diseases, however caused, and hold harmless Children For The Arts, its entities, directors, owners, agents, employees, volunteers and personnel (collectively "Releasees") to the fullest extent of the law. It is my express intent that this Waiver and Release Agreement shall be deemed as a hold harmless agreement, discharge and covenant not to sue Children For The Arts. I agree on behalf of myself and my child to release and hold harmless Releasees from any and all claims, liabilities, costs and expenses arising in connection with any activity during rehearsals and performances or anytime while on the premises during the course of my child's participation in Children For The Arts including any injuries, loss, or harm that occur during the activity or are related in any way to the activity.

I authorize and agree that Children For The Arts may take and use photographs or videos of my child as needed for advertising, social media, public relations and promotional projects and that I have no rights to the same will not be compensated for the same.

MY SIGNATURE IS PROOF THAT I HAVE READ AND FULLY AGREE TO THE TERMS OF THIS WAIVER AND RELEASE. I UNDERSTAND THIS CONTRACT AFFECTS MY LEGAL RIGHTS, AND HEREBY SIGN IT ON MY OWN FREE WILL. MY SIGNATURE IS PROOF OF MY INTENTION TO EXECUTE A COMPLETE AND UNCONDITIONAL WAIVER AND RELEASE OF ALL LIABILITY TO THE FULLEST EXTENT OF THE LAW.

\_\_\_\_\_  
Print name of Child/Children

\_\_\_\_\_  
Print name of Parent or Guardian

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date



**REHEARSAL AND PERFORMANCE SCHEDULE – SEUSSICAL KIDS  
AUGUST 16-OCTOBER 26  
FRIDAYS 4:30PM-7:00PM (extra Thursday rehearsals and tech week)**

08/16	AUDITIONS – Ballroom
08/23	REHEARSAL - Ballroom
08/30	REHEARSAL - Ballroom
09/06	REHEARSAL - Ballroom
09/13	REHEARSAL - Ballroom
09/20	REHEARSAL - Ballroom
09/27	NO REHEARSAL - Due to No Availability of Space
10/03	<u>THURSDAY REHEARSAL - Ballroom</u>
10/04	REHEARSAL
10/10	<u>THURSDAY REHEARSAL - Ballroom</u>
10/11	REHEARSAL
10/17	<u>THURSDAY REHEARSAL - Ballroom</u>
10/18	REHEARSAL - Stage

**TECH WEEK:**

10/21	MONDAY TECH REHEARSAL - Stage
10/22	TUESDAY TECH REHEARSAL - Stage
10/23	WEDNESDAY DRESS REHEARSAL - Stage

**PERFORMANCES:**

10/24	THURSDAY PERFORMANCE - 6:30pm - Stage
10/25	FRIDAY PERFORMANCE – 6:30pm - Stage
10/26	SATURDAY PERFORMANCE – 1:00pm – Stage

**CAST PARTY DIRECTLY FOLLOWING SATURDAY'S PERFORMANCE IN THE  
PULTE FAMILY CENTER CAFE**

**MOST REHEARSALS WILL BE HELD IN THE BALLROOM UP UNTIL THE TIME WE MOUNT THE SHOW ON THE STAGE. PLEASE BE COURTEOUS AND DO NOT ENTER THE AUDITORIUM/BALLROOM DURING REHEARSALS UNLESS IT IS AN EMERGENCY. EVERYONE WILL BE DISMISSED AT THE SAME TIME. YOU MAY WAIT OUTSIDE THE AUDITORIUM/BALLROOM OR BY THE MAIN ENTRANCE PRIOR TO DISMISSAL. IF ANY ACTOR NEEDS TO LEAVE EARLY OR IS GOING TO BE ABSENT FROM REHEARSAL, PLEASE INFORM TISH POORMAN BY EMAIL.**

**TISH POORMAN, PROGRAM DIRECTOR  
SEETISHRUN1@AOL.COM OR TPOORMAN@CHILDRENFORTHEARTS.COM  
239-571-3305**



## 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 and line readings for roles are held following vocal auditions. We encourage your child to audition for as many roles as possible and not just one role. Casting will be announced at the end of auditions. Roles will not be given out to those who have not completed the Registration Form and paid the Participation Fee.

**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.

### **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!

Questions should be submitted to Tish Poorman, Program Director  
seetishrun1@aol.com or tpoorman@childrenforthearts.com  
239-571-3305