



PERFORMING ARTS FORMS

RETURN THESE FORMS

- APPLICATION (one per student) **RETURN TO AUDITIONS**
- SIGNED HANDBOOK SIGNATURE PAGE **RETURN TO AUDITIONS**
- CAST FEES **RETURN TO AUDITIONS**
- CONFLICT FORM **RETURN TO AUDITIONS**
- OPTIONAL CAST REHEARSAL TEE SHIRTS ORDER FORM
RETURN TO MRS. POST BY FEB 11, 2021
- PARENT SHIRT ORDER FORM **RETURN TO MRS. POST BY FEB 1, 2021**
- VOLUNTEER FORM **RETURN TO AUDITIONS**

RETURN THIS FORM TO AUDITIONS

Cast Registration Form

(Complete one Form for **EACH** student)

STUDENT INFORMATION:

Student Name: _____ Grade _____

Gender: Male ___ Female ___ School Email _____

Address _____

Street

City

Phone: (Best number to contact you) _____ (student cell, parent cell, home phone)

Please note, we use GRADENET email to communicate to both parents and students.

STUDENT Tee Shirt Size: Child M. ___ Child L. ___ Adult: S ___ M ___ L ___ XL ___ 2XL ___ 3XL ___

Parent/Guardian Name: _____ Cell# _____

Parent/Guardian Name: _____ Cell# _____

NEW ACA Students

Do you read music? Yes No Circle the part(s) you sing: Soprano, 2nd Soprano, Alto, Tenor, Bass, ?

List any acting, voice, or professional dance training or lessons and the date you took them:

List any musicals or shows you have been in and the part(s) you played (include ACA Summer theatre):

Returning ACA Students

Do you read music? Yes, No Circle the part(s) you can sing: Soprano, 2nd Sop, Alto, Tenor, Baritone, Bass, ?

Last ACA Show you were in and the part(s) you played _____

List additional voice, dance, gymnastic, shows or classes taken since your last ACA musical including ACA Summer Theatre:

ALL Students

If needed, are you willing to change your hair/facial hair for your role? Circle below (may affect casting):

BOYS: Shave facial hair Cut hair* Color Hair (if a wig won't work)*

GIRLS: Cut hair* Color hair* *If a wig will not achieve the look.

Under no circumstances are students to take measures into their own hands by coloring or cutting their hair without the Director's approval.

BRING THIS FORM TO AUDITIONS.

HANDBOOK SIGNATURE PAGE

By signing below, you are acknowledging that YOU (parent and cast member) have gone through the performing arts handbook slide presentation on our school website (under the Performing Arts tab). You are also acknowledging that you have read the informational letter that was sent home with your child from the Audition Workshop. Both of these documents can be found on the aca website (acatulsa.org) under the performing arts tab) and agree to support the policies, procedures, volunteer hours, and fees associated with being a cast member and parent for the upcoming musical.

Student's Name _____ Grade ____ Student Signature _____

Student's Name _____ Grade ____ Student Signature _____

Student's Name _____ Grade ____ Student Signature _____

Parent/Guardian Name _____ Parent Signature and Date _____

RETURN THIS FORM TO AUDITIONS.

CAST FEES

(Please print)

Name of Student(s)

Student Name _____ Grade _____

Student Name _____ Grade _____

Student Name _____ Grade _____

CAST FEES are \$180 per student. You may pay by CASH, CHECK, PAYPAL OR ADD TO FACTS PAYMENT PLAN

FOR THOSE WANTING TO ADD PAYMENT TO FACTS

You must see Becky Davis in the school office to complete a form allowing payment to be added to FACTS.

FEES ARE DUE ON OR BEFORE FEBRUARY 2ND UNLESS ARRANGEMENTS HAVE BEEN MADE WITH DIRECTOR.

Note: If you need an extension of time for payment, PLEASE text OR call Gale Post at 918-852-2040 before returning this form to auditions.

of children _____ x \$180 = Total Due _____

PLAN TO PAY BY: CASH CHECK FACTS PAYPAL (check with office for this option)

STUDENT'S Name - printed

Parent Name - printed

Date

RETURN THIS COMPLETED FORM TO AUDITIONS

CONFLICT FORM

Cast members may have up to TWO (2) **pre-scheduled absences** (conflicts) during production. Conflicts are pre-planned events. Do NOT schedule any conflicts after Fall or Spring Breaks and please do not schedule on a Saturday rehearsal (which is usually a 4-6 hour rehearsal). **Conflicts MUST be recorded on this form and turned in on the day of your audition.** If you do not have a conflict, write NONE on the sheet and turn it in the day of auditions. Failure to return the form to auditions could cause you NOT to be cast until it is received. Should an unscheduled conflict arise, please contact the Director as soon as possible. Sickness is not a conflict and will be handled as outlined in the handbook.

Conflict #1 Date: _____ Conflict: _____

Conflict #2 Date: _____ Conflict: _____

_____ I have NO known CONFLICTS

Student's Name _____ Date: _____

Parent's Signature: _____ Date: _____

**RETURN THIS FORM TO MRS POST ALONG WITH PAYMENT.
Please return by February 11th.**

**OPTIONAL
Cast Rehearsal Tee Shirts**
(May be worn to rehearsals)

CAST Name: _____
Last First

Grade: _____ **Tee Shirt Size:** ___YM ___YL ___AS ___AM ___AL ___AXL (add \$3) ___2X ___3X

I Can't I Have Rehearsal CLEARANCE \$5

We are selling what sizes we have in stock as we will NOT be re-ordering these shirts. Check with us on sizing.

The Performing Arts Tee

\$10 each or \$13 for Adult 2X or larger.

Crew neck black with logo and mission statement

TOTAL DUE: \$ _____ Check# _____ Cash _____



RETURN THIS FORM ALONG WITH PAYMENT IF DUE TO MRS. POST
Parent Performing Arts Logo Shirt

ONE FREE PARENT TEE for **NEW** Performing Arts Parents. Additional tees at \$10 / \$13 each

Parent Name:

Phone #:

_____ I am a NEW PARENT

_____ I am a RETURNING PARENT

Size (circle): Adult: Small Medium Large Extra Large 2XL 3XL

ADDITIONAL QUANTITIES

____ @ \$10 each OR ____ @ \$13 FOR SIZES 2xl or 3xl

TOTAL DUE \$_____ Cash/Check

(WRITE FREE in TOTAL DUE if you are a NEW PARENT.)

SHIRTS ARE TO BE WORN WHEN YOU SERVE AT ANY OF OUR EVENTS!

Crew Neck, Heather Gray, Soft Cotton



We keep a limited supply of tee shirts. If we order, please allow 2-3 weeks. PLEASE RETURN THIS FORM BY FEBRUARY 11TH.

RETURN THIS FORM AND ANY PAYMENT TO AUDITIONS

All parents are asked to help us by volunteering a small amount of hours for our upcoming show. Please review the handbook for the exact hours.

PARENT VOLUNTEER FORM

Contact Information

Parent / Guardian Name: _____

Address _____ City _____ Zip _____

Parent Cell Phone # _____ Can you receive text messages? _____

Gradenet will be used for all email contacts. Please make sure you can sign into Gradenet!

Names/Grades of child(ren) enrolled/enrolling in Performing Arts 2020/2021 _____

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Volunteer Opportunities You either need to serve **10 HRS (one child)** or **15 HRS (multi-children)**. You can **PURCHASE 1/2** of your volunteer hours at \$10 per hour.

Mark the following events you wish to volunteer. Hours are recorded by hours served.

SEWING

Costume SEWING – **can read a pattern, can cut out patterns, have a sewing machine.** Projects can be worked on at home.

Costume NON SEWING– ironing, pulling costumes, embellishing costumes, hemming garments, steaming clothes or assisting costume supervisor with the run of the show. Some projects may be able to be done at home.

SET CONSTRUCTION / SET PAINTING - TIMES TO BE SET BY STAGE CRAFT CLASS.

Set Construction – Name of person working:

Set Painting

SUPERVISER A FRONT OF HOUSE TEAM AT ONE OF THE PERFORMANCES (10 hours credit)

Thursday, April 15 Friday, April 16 Saturday, April 17: 2pm 7pm

Sunday, April 18 - 3pm

WORK AS A CREW MEMBER FOR ONE OF THE SHOWS:

Thursday, April 15 Friday, April 16 Saturday, April 17: 2pm 7pm

Sunday, April 18 3pm

____ Decorate the front of house (foyer) for the run of the show and take down after the show has closed.
You will work with the Director on creating an inviting foyer for our guests that reflects the flavor of the show. Decorating can take place outside of school hours, or on a weekend that has been approved by the Director.

____ VALENTINE STORE - FEB 8-12th Shifts are before school, during lunch, and after school. Christi Rowland will contact you if interested.

Be part of the Auggie Awards Ceremony crew. * Sat, May 1, 5:30 - 8:30 in ACA Great Room * on calendar right now but this could be cancelled.

____ Work in Concessions
____ Help with set up and Decorating

____ NO PREFERENCE. JUST PLACE ME WHERE NEEDED.

____ **I WISH TO PURCHASE VOLUNTEER HOURS** - you may purchase up to ½ of your volunteer hours @ \$10 per hour.

I wish to purchase _____ volunteer hours at \$10 per hour to equal \$_____. **Payment for purchasing VOLUNTEER HOURS must be RETURNED with this form to your child to auditions.**

PARENT NAME: _____ STUDENT NAME: _____