

# Village Theatre KIDSTAGE

## Village Theatre Institute Performance Track Application Form

**PLEASE PRINT CLEARLY** (please attach additional sheets)

Name: \_\_\_\_\_ Age \_\_\_\_\_ Grade: \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_

Address \_\_\_\_\_ City/Zip \_\_\_\_\_

Phones: Home: (\_\_\_\_) \_\_\_\_\_ Parent Work/Cell: (\_\_\_\_) \_\_\_\_\_

Adult e-mail : \_\_\_\_\_

1. Please list theatre, music and dance experience (or attach resume): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Please list any special training or skills in voice, dance, acting, gymnastics, acrobatics, or musical instruments (or attach resume): \_\_\_\_\_  
\_\_\_\_\_

3. Is your participation contingent on receiving financial aid? Yes \_\_\_\_\_ No \_\_\_\_\_

4. Please describe why you would like to participate in this program in an attached document. (No more than 2 pages)

In the event of an accident or illness, I understand that every reasonable effort will be made to contact parent/guardian immediately. However, if I am unavailable, I authorize the KIDSTAGE staff to secure emergency medical care for (child's name) \_\_\_\_\_ as needed. Although I understand that KIDSTAGE will make every reasonable effort to provide a safe environment, I am fully aware of the special dangers and risks inherent in participating in theatre arts, which may include physical injury or other consequences arising or resulting from the program. Being fully aware of these risks, I hereby consent to my child's participation in this program and agree to hold Village Theatre and the KIDSTAGE staff harmless in any event.

Signature of parent/guardian \_\_\_\_\_ Date \_\_\_\_\_