



www.stageitupdrama.com

Stage It Up Youth Theater Group
“Perform well on stage and in life”
Northeast Branch Library
2228 Cottman Ave, Phila, PA 19136

Dear Parents/ Legal Guardian,

Stage It Up Youth Theater Group are offering free drama workshops and theater performances as a youth theater program located at the Northeast Branch Library. This program will run from May 4th- June 22, 2019 on Saturdays from 11am – 1pm. If you are interested in your child participating, please fill out the bottom section of this notice and have your child bring it with them during our casting calls and auditions on March 2, 2019 from 11am-1:30pm.

Participant Name: _____

I give permission for my child (named above) to attend the Stage It Up Youth Theater Group free drama workshops located at Northeast Branch Library on Saturdays from 11am – 1pm. Following the drama workshops, if your child is being picked up, please picked up your child before or by 1pm.

The activities that will be taught will be used to build your child’s artistic, self-esteem, positive social interaction, life skill and coping skills. Additional, youth will learn voice projection, improvisation, character development, team building, acting techniques, creative writing and show production. The activities in this after school theater program will be kept appropriate for all ages.

This is a free program, but we do ask if parents will consider giving a donation of any amount to help offset the cost of props, costumes, video editing, refreshments and gifts for the children. If you would like to donate, please visit our GoFundMe page <https://www.gofundme.com/help-youth-drama-group-perform>

Parents or Legal Guardians please sign, print your name and include contact# given your permission for your child’s participation.

Print _____, Signature _____, # _____,

In case of emergency who should we contact?

Parent(s)/Guardian(s)/Other _____ # _____

Prefer method of contact (circle) text or call or both

To received updates regarding performances date and progress please provide email address.

Email Address: _____

Information provided on this form will be kept strictly confidential.

Note: Please use the space below to provide any special accommodations concerning your child that we should be aware of; for example, allergies, religion beliefs and disabilities.



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AUTHORIZATION TO PRODUCE AND USE AUDIOVISUAL MATERIALS

I hereby voluntarily and without compensation authorize the Stage It Up Youth Theater Group, to produce photographs and videos, of the below named participants. This authorization is given on the condition that the materials taken or produced will be used for the purpose of community education and entertainment or program promotion; including the right to publish on Social Media Sites and Website (www.stageitupdrama.com).

I understand Stage It Up; will not use these materials for compensation. I understand that this grant of permission shall only be revoked by a written instrument delivered to the Executive Director of the Stage It Up. This consent shall remain in effect, unless revoked.

Name of Student _____

Name of Parent/Legal Guardian _____

Date Signature of Parent/Legal Guardian _____



Code of Conduct

To assure we have a safe and fun environment for everyone to enjoy please be read and sign.

***No foul language:** No curse words, offensive language, racist statements are not allowed in our theater group "AT ALL".

ONE MIC: Listen and do not interrupt when someone is speaking or performing being quiet when someone is speaking shows you have respect for them.

No judging and booing anyone's performances. (keep opinions to yourself unless we ask for it). Respect everyone when they are sharing (no booing or negative comments allowed)

Be trustful. (Do not share someone personal business outside of the group without their permission. (what is talked about in the group stays there)

***NO CELL PHONES:** Please put cell phones on vibrate just in case of emergency

***No Bullying AT ALL: Verbal or Physical**

***Group Participation is encouraged. We asked that** Everyone come ready to participate in all drama activities:

Group Attendances: attendances will be taken every day before workshops. ***Participants who come regularly will have first pick for lead roles.***

Please tear off, sign it and have your child return it to me. Along with the permission slip and photo release form Thank you again Shakina Small, Founder and Director.

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I have read and understand the expectations listed in this **Code of Conduct**. I also know that I will be held responsible for the information in this agreement.

Participant Print Name: _____ Signature: _____ Date: _____

Parent/Legal Guardian Print Name: _____

Parent/Legal Guardian Signature: _____ Date: _____