

The Pirates of Penzance

Summer Youth Workshop 2018

The Schedule

Rehearsals: Monday-Friday, 9AM-4PM, July 9-20

Performances: July 20-22 (Fri & Sat at 7pm, and Sun at 2pm)

All rehearsals & performances will be held at:

Seattle Gilbert & Sullivan
9250 14th Ave. NW, Seattle, WA 98117.

Tuition & Registration

Remember: We offer a 10% sibling discount! And partial scholarships are available to any families in need. Please contact youthprograms@pattersong.org for more information.

Please select:

- ___ Performer (entering grades 5-9) (\$675)
- ___ Performing intern (entering grades 10-12) (\$350)
- ___ Tech intern (entering grades 10-12). (\$350)

Everyone (actors & tech) please circle interests:

Costumes Props Set Lights Sound Stage Management

Performing interns participate alongside younger students in the show and are eligible for any role. They are expected to model strong rehearsal skills and assist younger performers as need. Tech interns will work under supervision of tech and directorial staff and should be present at all rehearsals and performances.

Student's name: _____ Date of Birth: _____

School: _____ Entering Grade: _____

Parent/Guardian 1: Name: _____ Relationship to student: _____

Address: _____ City _____ Zip _____

Home phone: _____ Work: _____ Cell: _____

E-Mail: _____

Parent/Guardian 2: Name: _____ Relationship to student: _____

Address: _____ City _____ Zip _____

Home phone: _____ Work: _____ Cell: _____

E-Mail: _____

If applicable, student cell phone: _____

What is the best way to contact your family? _____

May we share names and contact info on a camp roster (for participants only)? _____

Emergency contacts (name, relationship & phone number):

1) _____

2) _____

Release permission:

My student can go home by his/herself (circle one). Yes / No

My student can be picked up by the following people _____

What is your child's experience with acting, singing and/or dance? Special talents?

Please describe any special medical concerns, allergies, dietary restrictions, physical, social/emotional or behavioral conditions or learning challenges that may affect your child's participation and let us know how we can best support your child:

Is there anything else that would be helpful for us to know about your child? _____

Emergency Treatment/ Liability Release:

In the case of an emergency, I hereby authorize representatives of Seattle Gilbert & Sullivan Society (SGSS) or Theater of Possibility (TOP) to seek medical assistance at the nearest medical facility and I the undersigned will be responsible for all medical costs and transportation necessary. I hereby release SGSS and TOP from liability for damages, injuries or loss to my child during or resulting from his or her participation in this camp and waive any claim against SGSS and TOP, and their agents, employees, or servants, whether paid or volunteer.

Parent’s signature: _____ Date: _____
(or signature of participant 18 years or older)

Signer’s Name (Print): _____

Hospital preferred: _____ Child’s physician: _____

Physician’s phone: _____ Medications: _____

Media Release:

By signing the release above, I hereby allow SGSS and TOP to use my child’s likeness in still or moving picture format in any of its publications, for publicity or any other lawful purpose. If you would like to withhold that permission, please check here: _____

Please return this signed form and \$100 deposit to: Youth Programs, Seattle Gilbert & Sullivan Society, 9520 14th Ave NW, Seattle, WA 98117. The tuition balance is due by June 15, 2018, unless other arrangements have been made.

Please contact youthprograms@pattersong.org or Lauren Marshall at 206 321-4923 if you have any questions. Thank you!