## **REGISTRATION FORM**

Children's Theatre (ages 4-15)

#### Frozen

Name (as you would like it li	isted in the prograr	n):				
Mailing Address:						
Birthday: (mon	th)	_ (day) _ (Female)				
On June 1st, my child will be <i>Frozen</i> will make			SF's Children's T	heatre Worksho	op.	
What school does your child In what grade is your child						
Is your child of Native Ame	rican descent?	(Yes)	(No)	*No į	proof of heritage	e needed!
#1 Guardian's Name:						
Cell #:					_	
Email:					-	
						l
#2 Guardian's Name:					-	
Cell #:					-	
Email:					-	

Children's Theatre begins **Monday, June 1**st. Performances are June 26, 27 and June 28 \*If the participant has conflicts during the rehearsal period after June 8<sup>th,</sup> please reconsider involvement. **For more information, call (580) 745-2696** 









## **ORDER FORM**

\*Please complete one order form per participant.

TUITION	@ \$130.00ea	nch = \$		
l .		Child Large Adult Large		
Child Small Adult Small	EASON Shirts: (Indi Child Medium Adult Medium	Child Large Adult Large		each \$
FROZEN Shirts Child Small		led with the tuition) Child Large		each \$
	Adult Medium Adult 2XL	_	Adult 4XL	
Child Small Adult Small	ROZEN Shirts: (Indic Child Medium Adult Medium Adult 2XL	Child Large Adult Large		each \$
	atre DVD: atre BLUE RAY: atre FLASH DRIVE:	@ 2	5. each = \$ 0. each = \$ 0. each = \$	
\$_	atre Photos@ \$5 each =\$@ \$5 each =\$@ \$5 each =\$	Small Group	Photo	
(3	atre Parent Pack B tickets)@\$ icket to each of the thre		which your child will p	articipate.
	*You may divide yo	<b>Grand Total</b> \$ our grand total into	payments. Balance du	e by June 28 <sup>th</sup> !
Name:				
Paid: CASH	CHECK Credit Car	rd		

# Children's Theatre Workshop Participant Information Sheet List only one child on a form.

Child's Name:					
Mom's Name:		Mom's Cell:			_
Dad's Name:		Dad's Cell:			_
Physician's Name:		Phone:			_
Insurance Company:			<del></del>		
Policy Number:					
that if a person is NOT on th	are authorized to pick up the stu his list, they will be <b>UNABLE to t</b> heatre. <b>The authorized must p</b>	ake the child.	A current pictu	ure id will be requ	
Southeastern, the Oklahoma liability arising from, related sustained in the course of an with Southeastern Oklahomattest that this Waiver of Liaheirs, next of kin, executor,	undersigned release and dischar a Shakespearean Festival and its d to, or connected with any injur- ny participation in classes, rehea a State University, Theatre at So ability is provided voluntarily up administrator, and/or personal the above and do attest that the owledge.	s staff, officers, d ry or illness or d arsals, performa outheastern or t oon submission representative.	lirectors, agent lamage to my p ances or other a the Oklahoma S of this form ar	ts and volunteers person or proper activities conduct Shakespearean Fe nd shall be fully b	s from any and all ty caused by or ted by or associated estival. I hereby inding upon me, my
Parent/Guardian's Signat	cure	Date			_
SPECIAL INSTRUCTIONS	<b>S</b> :				

#### Oklahoma Shakespearean Festival's

## **Casting Statement - FROZEN**

	Child's Name:	
	ANNA Cast (Morning):	ELSA Cast (Afternoon):
	MUST give a reason below. The more flexibil	<b>olved</b> , please indicate it here. <b>If you mark a particular</b> lity you give us on workshop preferences, the greater the d will be cast in larger roles.
Reason:		
	the different workshops meet?	t fuom 1 2mm
When will		

## Will the workshops be doing different productions?

Both workshops will be doing the SAME production of *Frozen*.

#### When are the performances for each cast?

Each cast will have three performances each.

ELSA CAST: June 26 at 7pm, June 27 at 2pm and June 28 at 2pm ANNA CAST: June 27 at 10am and 7pm and June 28 at 5pm

#### Can I enroll my child in both workshops?

You can enroll your child in both workshops. However, children must be picked up at 11am and brought back at 1pm. They cannot stay in the theatre between workshops.

#### Will siblings be kept together?

We will try to keep siblings together in one cast. However, if two siblings are up for the same leading character, we will split them into different casts.

#### Will my child be able to be in the same cast as their friends?

Possibly, but there is no guarantee. We are more interested in the children's safety and positive experience in the arts. Hopefully, they will make new friends during the workshop!

#### How will we carpool?

The casting letters will go out in early May. This should give ample time for parents to figure out carpooling/transportation issues.

#### Will the ages for the workshop remain the same?

Children must have completed Pre-K or be going into their kindergarten year in the fall in order to participate. The last year children can participate is the summer after their 8th grade year in school or those going into their 9th grade year in the fall.

As always, we encourage all students 10 years of age or older to also participate in the Young Actor's Studio. Young Actor's Studio is just another version of Children's Theatre for older students in grades 5-12.

#### Oklahoma Shakespearean Festival's

## **Conflict Sheet - FROZEN**

Name:	No Conflicts:
Please list any conflict you may	have during the rehearsal process.

#### **Absences**

If you KNOW your child is going to miss rehearsal for any reason, please write it below. ANY ABSENCE will automatically prevent them from being cast as a member of the PRINCIPAL group.

If your child is cast as a member of the PRINCIPAL group, they may not miss rehearsals for any reason other than illness or a death in the family. If a member of the PRINCIPAL GROUP misses rehearsal for trips, vacations, church camp, cheer camp, dance competition, ball games, etc., THEY WILL BE RECAST IMMEDIATELY – REGARDLESS OF WHEN THE ABSENCE OCCURS.

If your child is cast as a member of one of the regular groups, absence from rehearsal is still highly frowned upon. If a member of a regular group intends to miss rehearsal for trips, vacations, church camp, cheer camp, dance competitions, ball games, etc. AFTER THE FIRST WEEK OF THE WORKSHOP, you should reconsider their involvement.

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
	01 June	02	03	04	05	06
07	08	09	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28						

## **EXTRA TICKET ORDER FORM**

Participant's Name:	
FROZEN: (Children's Theatre Workshop)	
ELSA CAST: Friday, 26 June at 7pm	
GENERAL ADMISSION tickets at \$8 each	TOTAL:
ANNA CAST: Saturday, 27 June at 10am	
GENERAL ADMISSION tickets at \$8 each	TOTAL:
ELSA CAST: Saturday, 27 June at 2pm	
GENERAL ADMISSION tickets at \$8 each	TOTAL:
ANNA CAST: Saturday, 27 June at 7pm	
GENERAL ADMISSION tickets at \$8 each	TOTAL:
ELSA CAST: Sunday, 28 June at 2pm	
GENERAL ADMISSION tickets at \$8 each	TOTAL:
ANNA CAST: Sunday, 28 June at 5pm	
GENERAL ADMISSION tickets at \$8 each	TOTAL:
25 <sup>th</sup> ANNUAL PUTNAM COUNTY SPELLI	NG BEE:
Wednesday, 01 July at 7pm	
GENERAL ADMISSION tickets at \$8 each	TOTAL:
Thursday, 02 July at 7pm	
GENERAL ADMISSION tickets at \$8 each	TOTAL:
EXTRA TICKETS GR	AND TOTAL:

## **PRICING GUIDE**

<b>TUITION</b>	<u>AMOUNT</u>	<b>TOTAL</b>
Tuition for FIRST child	\$130.00	\$130.00
Tuition for SECOND child  (or one child in Children's Theatre and Young Actor's Studio)  (or one child enrolled in both workshops of Children's Theatre)	\$117.00	\$247.00
Tuition for THIRD child	\$104.00	\$351.00
Tuition for FOURTH child	\$91.00	\$442.00
Tuition for FIFTH child	\$78.00	\$528.00

<u>TICKETS</u>	<u>AMOUNT</u>
Ticket	\$8.00
Children's Theatre PARENT PACK	\$18.00
(one ticket to each of the three performances)	
Young Actor's Studio PARENT PACK	\$12.00
(one ticket to each of the two performances)	

OTHER ITEMS	<u>AMOUNT</u>
SEASON shirt (one comes free with each child)	\$15.00
CHILDREN'S THEATRE show shirt	\$15.00
YOUNG ACTOR'S STUDIO show shirt	\$15.00
DVD	\$15.00
Blue Ray or Jump Drive	\$20.00
Individual Photo	\$5.00
Small Group Photo	\$5.00
Full Cast Photo	\$5.00



## **Credit Card Authorization**

NAME ON CARD				
TYPE OF CARD	VISA	MASTERCARD	AMEX	DISCOVER
TRANSACTION TYPE	DEBIT	CREDIT		
ACCOUNT NUMBER				
EXPIRATION DATE				
CVN NUMBER				
	_			
BILLING ADDRESS				
CITY, STATE, ZIP				
PHONE NUMBER				
EMAIL ADDRESS				
TOTAL AUTHORIZED AMOUNT				
NUMBER OF INSTALLMENTS				
PARTICIPANT'S NAME				
	_			
CARDHOLDER NAME				
SIGNATURE				
DATE				
AUTHORIZATION NUMBER				

## Ms. Shakespearean would like you to join Children's Theatre Workshop!



To receive messages via text, text @osfctw to 81010. You can opt-out of messages at anytime by replying, 'unsubscribe @osfctw'.

Trouble using 81010? Try texting @osfctw to (580) 453-6599 instead.



\*Standard text message rates apply.

Or to receive messages via email, send an email to osfctw@mail.remind.com. To unsubscribe, reply with 'unsubscribe' in the subject line.





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