

**ACT ONE THEATRE SCHOOL**  
**2010 Registration and Emergency Release Form 2011**

male  
 female

STUDENT'S NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE (Home) \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

Is email an effective means of communication with you? \_\_\_\_\_

Tee Shirt Size: YS(6-8) YM(10-12) YL(14-16) AS AM AL AXL

AGE \_\_\_\_\_ BIRTHDATE \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_ Grade in Sept. '10 \_\_\_\_\_

SCHOOL \_\_\_\_\_ SCHOOL DISTRICT \_\_\_\_\_

I give permission to enter the above contact information in the production cast directory. Yes \_\_\_\_\_ No \_\_\_\_\_

I give permission for my child to be interviewed or photographed by the media. Yes \_\_\_\_\_ No \_\_\_\_\_

**Circle ONE class:**

Theatre Class or Professional Training Program (see brochure):

GR 2-4: T24 F S924 GR 5-8: M T W TH S958 S11:30

Grades 9-12: HSM PTP

K/1st Grade: Session 1 Session 2 Adult

PARENTS' NAMES \_\_\_\_\_

WORK PHONES: Father \_\_\_\_\_ Mother \_\_\_\_\_

Cell/Pager: Father \_\_\_\_\_ Mother \_\_\_\_\_

Health Insurance Carrier And Number \_\_\_\_\_

Doctor's Name \_\_\_\_\_ Phone # \_\_\_\_\_

**PERSON TO CONTACT IN AN EMERGENCY**

if parents are not available:

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Please note any physical conditions of which medical personnel should be aware:

Please list any medications student takes on a regular basis:

Please note any medications known to cause an allergic reaction:

I give representatives of ACT ONE THEATRE SCHOOL permission to seek emergency medical care for \_\_\_\_\_ in the event that I cannot be reached or until I am able to be present.

\_\_\_\_\_  
*Signature of Parent/Guardian*

\_\_\_\_\_  
*Date*

Please complete a separate form for EACH child on BOTH sides, MAIL with a check to:

**ACT ONE THEATRE SCHOOL**  
**311 Willett Road • Glenshaw, PA 15116**

**ACT ONE THEATRE SCHOOL**  
**2010 PAYMENT CONTRACT 2011**

**Theatre Classes Grades 2-8**

*Please choose the payment plan that is convenient for you.*

- \$1180 due at registration
- \$600 due at registration and \$580 due Jan. 1
- \$220 due at registration, \$120 due monthly from Sept. 1-April 1.  
*\$220 registration fee is non-refundable.*

**K/1st Grade Class**

- \$200 due at registration per each Session
- \$100 due at registration and \$100 due Oct. 1  
Session 1 - 9/11 thru 11/20
- \$100 due at registration and \$100 due Feb. 1  
Session 2 - 1/8 thru 3/12  
*\$75 of the initial payment is non-refundable.*

**Adult Class**

- \$250 due at registration
- \$150 due at registration, \$100 due October 1  
*\$50 of the initial payment is non-refundable.*

**High School Core Curriculum**

- \$1200 due at registration
- \$600 due at registration and \$600 due Jan. 1
- \$240 due at registration and \$120 due monthly from Sept 1-April 1  
*\$240 registration fee is non-refundable*

**Professional Training Program**

- \$1700 due at registration
- \$850 due at registration and \$850 due Jan. 1
- \$250 due at registration and \$181.25 due monthly  
from Sept 1-April 1  
*\$250 registration fee is non-refundable*

Ten free show tickets will be distributed to students performing in the spring production who have paid the full tuition by April 1.

*Please include your non-refundable Theatre Class registration fee and your September payment with this form.*

Theatre amt. pd. \$ \_\_\_\_\_ Check # \_\_\_\_\_

\_\_\_\_\_  
*Signature of Parent/Guardian*

\_\_\_\_\_  
*Date*