

**ACT ONE THEATRE SCHOOL**  
**2017 Registration and Emergency Release Form 2018**

STUDENT'S NAME \_\_\_\_\_ male  
female  
ADDRESS \_\_\_\_\_  
CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
PHONE (Home) \_\_\_\_\_  
PARENTS' EMAIL ADDRESS \_\_\_\_\_  
Is there a 2nd email for newsletters? \_\_\_\_\_  
Tee Shirt Size:        YS(6-8)        YM(10-12)        YL(14-16)        AS        AM        AL        AXL  
AGE \_\_\_\_\_ BIRTHDATE \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_        Grade in Sept. '17 \_\_\_\_\_  
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:**

Grades 2-4:	T24	W24	Th24	F24	S924	S2411:30
Grades 5-8:	M	T58	W58	Th58	S958	S11:30
Grades 9-12:	HSM	PTP				
	K/1: Fall Session		Winter/Spring Session			

PARENTS' NAMES \_\_\_\_\_  
Parent's Cell \_\_\_\_\_ Parent's Cell \_\_\_\_\_  
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**  
**2017 PAYMENT CONTRACT 2018**

**Theatre Classes Grades 2-8**

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

- \$1300 due at registration
- \$650 due at registration and \$650 due Jan. 1
- \$200 due at registration, \$137.50 due monthly from Sept. 1–April 1.

*\$200 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 - 9/23 thru 12/2
- \$100 due at registration and \$100 due Feb. 1

Session 2 - 1/6 thru 3/10

*\$75 of the initial payment is non-refundable.*

**High School Core Curriculum**

- \$1500 due at registration
- \$750 due at registration and \$750 due Jan. 1
- \$250 due at registration and \$156.25 due monthly from Sept 1–April 1

*\$250 registration fee is non-refundable*

**Professional Training Program**

- \$1800 due at registration
- \$900 due at registration and \$900 due Jan. 1
- \$200 due at registration and \$200 due monthly from Sept 1–April 1

*\$200 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*