



LIFE IN THE THEATRE

BOOT-CAMPS AND WORKSHOPS FOR RISING STAR HIGH SCHOOLS

REGISTRATION FORM

CIRCLE ALL THAT APPLY: I'M ENROLLING IN

- A.) Business of Acting *boot-camp*
- B.) Craft of Playwriting *boot-camp*
- C.) Musical Theatre Project *workshop*
- D.) PLAYPROJECTS *workshop*
- E.) All of the above "Name in Lights" Package

Today's date:		Are you a Rising Star Student?: (Y) or (N) If yes: How long have you been in the program? First attendance date _____ Last _____			
STUDENT INFORMATION					
Student's last name:		First:		High School Name:	
				Education Grade Level:	
Any other name you go by:	Best time to reach you:	Birth date: / /	Age:	Sex: <input type="checkbox"/> M <input type="checkbox"/> F	
Street address:		Home phone no.: ()		Additional phone no.: ()	
P.O. box:	City:		State:	ZIP Code:	
Please list any medical/ or special needs you may have:		Parent/ Guardian Name:			Contact Number: ()

Please list any theatre experience (Acting, Directing, Design, Other):

What is your favorite play/ or musical?

IN CASE OF EMERGENCY

Name of local friend or relative:	Relationship to Student:	Home phone no.: ()	Work phone no.: ()
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The above information is true to the best of my knowledge. I understand that I am financially responsible for the Life in the Theatre tuition. I hereby consent to the participation in interviews, the use of quotes, and the taking of photographs, movies or video tapes of the participant (student). I also grant San Francisco Playhouse (in association with the Rising Star Program) the right to edit, use, and reuse said products for non-profit purposes including use in print, on the internet, and all other forms of media. I also hereby release San Francisco Playhouse and its agents and employees from all claims, demands, and liabilities whatsoever in connection with the above.

Student/ Participant signature

Parent/Guardian signature

Date