



## PARENT/STUDENT CONTRACT

Student Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Teacher: \_\_\_\_\_

Parent Name: \_\_\_\_\_

Parent Email: \_\_\_\_\_

Parent Cell #: \_\_\_\_\_

### REHEARSAL SCHEDULE

\*Rehearsals will be on Tuesday and Thursdays from 2:30-4:30 from Feb 5th to May 9th. Most rehearsals will be all-calls (entire cast).

Tech/Performance week is Monday, May 13<sup>th</sup>-Sunday, May 19<sup>th</sup>.

Tech Week is Monday, May 13 through Thursday, May 16. Tech week rehearsals are at least 3 hours (maybe more). A final schedule will be sent to families once the cast is set.

Performances on May 17 through 19.

**Any students who cannot be at every tech week rehearsal for the ENTIRE rehearsal cannot participate in the show.** Please list any conflicts you have with rehearsal times:

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## **COMMITMENT & BEHAVIOR AGREEMENT**

**Being a member of CDM's Drama Club is a big commitment and will require regular attendance and positive attitude from every student. Our rehearsal time is very limited. Behavior and attitude during rehearsals determine how successful we can be.**

### **STUDENT COMMITMENT:**

I agree to attend all required rehearsals, and will give my best effort in learning and practicing my assigned parts.

Note: no more than 3 unexcused absences are permitted.

I will abide by the rules and expectations during rehearsals and performances for *The Little Mermaid Jr.* I will respect the directors, parent volunteers and fellow cast mates. I understand that if I receive more than 2 behavior warnings, a phone call will be made to my guardian and I may be removed from the scene.

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**Student Name:**

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**Student Signature:**

## **PARENT/GUARDIAN COMMITMENT AGREEMENT**

**During Tech Week (May 13 - 19) I will make sure my student is available to attend ALL rehearsals. I will do my best to have my child attend all T/ Th rehearsals.**

I understand that there may be a case where my child is not included in a particular scene if he/she was not at the rehearsal when the parts were assigned and the choreography was taught.

As the parent/guardian of a Drama Club participant, I agree to pay the \$350 production fee and if possible, a donation of my time, and/or by providing food, drinks, or money for snacks and meals.

I understand that the director(s) may cast my child in any role they find most suitable for their abilities. If I decide not to continue based on the role, I understand that I will not receive a refund for this process.

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Parent Signature:

## **LIABILITY RELEASE**

I understand that there are potential risks associated with my child's participation in the Production; including but not limited to the risk of theft, damage to personal property, and/or personal injury. I, on behalf of myself and my child irrevocably and unconditionally remise, release, settle, compromise and forever discharge any and all manner of suits, actions, causes of action, damages and claims, that I or my child, have or may have against the PTA and/or its directors, officers, employees, agents, assigns, or contractors.

**Initial:**\_\_\_\_\_

## IMAGE/NAME PERMISSION & RELEASE

I give permission for my child, as a participant in Drama Club, to be videotaped, photographed or otherwise have his or her image and voice recorded, in connection with CDM Drama Club. **Initial:** \_\_\_\_\_

## REFUND POLICY

I understand that after my child attends auditions no refunds will be issued for any reason. **Initial:** \_\_\_\_\_

## VOLUNTEER POLICY

I understand that I will be asked to assist with the show, by ushering performances, or helping with tech, set, costumes, or front of house display. **Initial:** \_\_\_\_\_

### I can help with: (please check top 2 choices)

- |                                       |   |
|---------------------------------------|---|
| <input type="checkbox"/> Concessions  | <input type="checkbox"/> Hair/Makeup              |
| <input type="checkbox"/> Props        | <input type="checkbox"/> Cast Party               |
| <input type="checkbox"/> Backstage    | <input type="checkbox"/> House Management/Tickets |
| <input type="checkbox"/> Refreshments |   |

*My initials by each section above, and signature below, indicate I have read and understand the contents of this contract.*

### ACCEPTED AND AGREED BY:

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Parent's/Guardian's Name

Date

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Parent's/Guardian's Signature

Date

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Student's Name

Date of Birth

**PERMISSION FOR AFTER-SCHOOL AND EVENING  
REHEARSALS** *The Little Mermaid, Jr.*

My student, \_\_\_\_\_, has my permission to attend rehearsals on Tuesdays and Thursdays from 2:30pm-4:30pm. I have read and signed the liability release form.

**Please check all that apply:**

- \_\_\_\_\_ I will pick up my student on time after rehearsals.  
\_\_\_\_\_ my student has my permission to walk or ride their bike home  
\_\_\_\_\_ student will return to child care \_\_\_\_\_  
\_\_\_\_\_ my student *may* be picked up by the following people:

**You are responsible for picking up your child *within 10 minutes of the rehearsal end time*.** If you or someone you designate is habitually late to pick up your student, we may **dismiss** your child from the cast. Please be respectful. Thank you

Please list any food allergies, or medical conditions your child has or medications they are currently taking:

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\_\_\_\_\_  
**Parent/guardian Signature:**

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**Parent/guardian mobile phone:**