



Registration Form:

Participant's Name: _____ Age/Grade: _____

Address: _____

Cell Phone Number: _____ Work Phone Number: _____

Parent(s)/Guardian(s) names: _____

Parent/Guardian Cell Phone number: _____

Parent/Guardian E-mail address: _____

Previous experience in Theatre, Stage Crew, Dance, Music (please list any theatrical productions and roles played): _____

How did you hear about West Arts Productions: (Circle one)

Website Show flyer Attended a performance Facebook/IG A friend/other:
Friends name/other: _____

I hereby consent that the photographs, videotape, and/or audio recordings made may be used by West Arts Productions on our social media, website, and other.

Parent/Guardian Signature: _____ Date: _____

Participation Dues: \$100.00 (December 9th) — Lead Fee (If Cast): \$50 (December 14th)
Payment plans are available (please see additional paperwork)

Payment methods: Cash, Check (West Arts Booster), or Venmo (@westartsproductions)
Any returned checks will be charged a \$30.00 fee. **No Refunds.**

Office use only

Cash Amount: \$ _____

Check Amount/#/Name _____

Venmo Amount: \$ _____

Received by: _____

Shirt Size _____



Emergency Information Form

Student Information:

Student's Name: _____ Birthdate: _____

Address: _____ City, ST, Zip Code: _____

Cell Phone Number: _____ Home Phone Number: _____

Parent/Guardian Contact Information:

Parent(s)/Guardian(s) Name: _____

Address: _____ City, St, Zip Code: _____

Cell Phone Number: _____ Email Address: _____

Emergency Contacts:

Primary Emergency Contact: _____ Relation to Student: _____

Cell Phone Number: _____ Work/Home Phone Number: _____

Secondary Emergency Contact: _____ Relation to Student: _____

Cell Phone Number: _____ Work/Home Phone Number: _____

Medical Information:

Student's Physician's Name: _____ Address/Location: _____

Office Phone Number: _____ After Hours Number: _____

Health Insurance Company: _____ Group/Policy Number: _____

Medication/Allergies/Special Conditions: _____



Payment Plan Contract:

Students who have decided to set up a payment plan are held accountable for completing all payments as listed on the contract.

Name: _____ Date: _____

Responsible Party: _____ Phone Number: _____

The payment plan contract divides the \$100 Mainstage registration into 3 payments. The payments are due by the following dates:

- First payment due at registration payment of \$34.00
- 2nd payment due by January 11th, 2021 of \$33.00
- Final payment due by February 8th, 2021 of \$33.00

- ✓ You will receive an invoice reminder one week prior to each payment due by date
- ✓ This payment plan is only good for the registration price. Lead fee not accepted in payment plan.
- ✓ Tuition must be paid off before the production is over.

Failure to pay money owed will result in:

- The participant will not be able to participate in:
 - Rehearsals
 - Tech week
 - Performances
 - A \$30.00 late fee will be charged for each late payment received or returned checks.
- No Refunds.**

I, the undersigned, have read/understand and agree to West Arts Productions policies for the payment plan. I agree to comply with the policies listed and hereby request a payment plan for the Mainstage production.

Parent/Guardian Name: _____

Parent/Guardian Signature: _____

Office Use Only

Date	Payment Amount	Lead fee	Cash/Check	Balance Due	Received by



Audition Form:

Auditions are open to anyone who wishes to participate. Please be advised that a \$30.00 lead fee will be added if cast as a lead. This payment will be due by **December 14th, 2020**. Failure to pay this fee can result in removal from lead role. A \$5.00 (*Per day*) late fee will be added for all late payments.

- Rehearsals will be Monday and Wednesday evenings (*See Shutterfly for an updated list*)
- **Zoom Info Meeting November 23rd, 2020 at 7pm on Zoom**
- Mandatory Tech Rehearsals: TBD (*Weekends/Holidays off*)
- Show dates: March TBD
- Must provide: costumes, concession donation, and other show needs
- One parent per family must volunteer to work at least one performance
- All tuition, lead fee, and any other fees paid are not refundable

Please list **ALL** schedule conflicts you will have. This includes: vacations, sport practices, youth group, etc. Scheduled conflicts will be kept in mind when casting the show.

Examples: Family vacation to AZ March 20th-24th, church youth group every Tuesday at 5pm

Parts I want to audition for:

- 1.
- 2.
- 3.

I will accept any role given to me (including ensemble) ____yes ____no

Girls, I will accept a male role ____yes ____no

I have read and understand what is expected of my child and myself.

I have read and understand that there is a lead fee and that failure to pay this fee, if cast, will result in loss of the part. I have listed all known schedule conflicts. I also understand there are not refunds of any kind.

Student Name: _____ Signature: _____

Parent/Guardian Name: _____ Signature: _____



Show Shirt Order Form!



ROALD DAHL'S Matilda THE MUSICAL

Each Cast Member receives a show shirt, but you can get one for \$20! So get one for your Mom, Dad, Grandparents or Anyone!

Payment methods Cash or Check made out to: West Arts Booster. No refunds.

Last day to select your size: January 27th, 2021! Shirts will NOT be for sale at the show, so don't miss out!

Student's Name: _____

Child small: _____

Child medium: _____

Child large: _____

Adult small: _____

Adult medium: _____

Adult large: _____

Adult x-large: _____

Adult xx-large: _____



We WOOD love your help!

As we all know your child's performance is fast approaching. This letter is a plea for your help; we are in desperate need of wood for our sets. We are turning to you, the parents for help. We need donations so we can purchase wood and hardware to make this an experience your performer will never forget. It's a GREAT tax write off!!!!

The reason for the purchase is to build beautiful sets. This will allow our show to have a more professional look and give your child more room to shine!

This is how you can help:

Cash/Check/Venmo donations or Home Depot gift cards of \$1, \$5, \$10, \$20, and \$100's..you name it! Checks payable to West Arts Booster.

\$99 and under = Bronze recognition in show program

\$100-\$199 = 2 General show tickets. Silver recognition in show program

\$200 and up = 2 Lux tickets. Gold recognition in show program

Any amount of donation is GREATLY appreciated! Please fill out the form below and turn it into Ed Munoz. Thank you very much for all your support. Feel free to email us with any questions you may have: (714) 837-9402 or westartsproductions@hotmail.com

Performer's Name: _____ Phone Number: _____

Cash Amount: _____ Gift Card Amount: _____

Name you would like to appear in show program: (Please print clearly)

Non-Profit Tax ID Number: **46-4162469**