

Name: _____ **Age:** _____ **Birth Date:** _____
School: _____ **Grade:** _____
Address: _____ **City:** _____ **Zip:** _____
Home Phone: _____ **Cast Member Cell:** _____
Cast Member E-Mail: _____ **T-Shirt Size:** _____
Parents' Names: _____
Parents' Cell Phones: _____
Parents' E-Mails: _____
Emergency Contact/Phone: _____
Medical Information:
Allergies: _____
Medication: _____
Special Needs/Pre-Existing Conditions: _____
How did you hear about us? _____
Preferred role(s): _____
Will you accept another role? _____

By initialing each item and signing this registration form, the cast member agrees to the following (parent initials required for those under 18 years of age):

- _____ Be on time for all rehearsals. 'On time' is considered 5 minutes before scheduled rehearsal time. Please send a text message to Miss Kim at 847-287-8180 if you are going to be late.
- _____ Notify Miss Kim by text if you're ill or there is an emergency and you will not be able to attend rehearsal.
- _____ Be prepared with script, pencil, water, dance shoes, or any other items required at each rehearsal.
- _____ Provide shoes, appropriate underclothing and basic items required for costuming.
- _____ **Tech week is mandatory unless conflicts approved before casting.** Please make alternate arrangements for conflicts that arise during tech week and performances.

Release of Liability and Indemnification Clause

I, the Participant and/or the parent(s) and/or legal guardian(s) of said Participant, understand and acknowledge that the Participant undersigned is in good health and is able to participate in the Hello Broadway theatrical production. I confirm that the health information listed above is true, complete and accurate. I acknowledge that I am solely and fully responsible for any and all medical and/or injury-related treatment and/or expenses that otherwise relate to or arise from participation in Hello Broadway activities. I request that Hello Broadway allow myself or named child to participate in Hello Broadway activities. In consideration thereof, I agree to release, defend, indemnify and hold harmless Hello Broadway, directors, staff, volunteers, agent, landlords, invitees, and independent contractors from any and all liability known and unknown resulting from or arising out of the rendering of any and all first aid, if any, and/or illness, injury, and/or death of the Participant in any Hello Broadway-sponsored production or activity.

Waiver of Usage Rights

I give my permission to use any photographs, pictures, videos, web site and/or sound recordings taken during Hello Broadway activities, rehearsals and/or performances which may include me or my child in promotional materials.

By signing this document, I agree to the terms and conditions of this Performance Agreement as stated.

Participant Signature: _____ Date: _____

Parent/Guardian Signature: _____ Date: _____