

Template - Please make a copy to edit

Parent Information

- Information:** If you have any questions, please contact the stage manager by phone or text at (Cell Number) or by email at (email). Rehearsal schedules, promotional dates and other important information will be shared with the cast and crew by email.
- Rehearsals:** Rehearsals are generally _____ but please consult the schedule for specific times. Rehearsals will be located in the Imperial Theatre studios. Not everyone will be needed for every rehearsal. Please check the schedule. (A link has been emailed to you, and an updated schedule link will be sent out weekly.) **If for any reason your child cannot make a rehearsal, please contact (Name: Stage Manager) as soon as possible.** Frequent absences, or absences without notification may result in your child being removed from the production.
- Show Commitments:** The show will run from (Show Dates) Note: the (dates) are evening performances, the (date)is a matinee. Tech dates are (Tech Dates). Tech night rehearsals can run late. Please be prepared and have your child bring something quiet to do. Any cast members under the age of 15 can leave Tech Rehearsals at 9:30. Please let the Stage Manager or a Producer know if you are leaving early, and check with the Stage Manager or one of the producers before you leave.. It is mandatory that all cast members attend all rehearsals during Tech week, and all show dates. If any of these dates pose an issue for your child, unfortunately they will have to be replaced in the cast. Please let us know immediately. Media day is (Media Day Date) Attendance is mandatory for this as well.
- Pickup:** To ensure your child’s safety, please make sure to check in with one of the production team before leaving each rehearsal. Children under 16 will not be allowed to leave on their own unless we receive a written notification from you. Please notify us in advance in writing, or by email or text, if someone else is picking your child up.
- Behaviour:** We have a number of children in this cast, and it is very important that children behave appropriately during rehearsals. If any member of the production team needs to talk to your child repeatedly about their behaviour, we will be contacting you. If a suitable arrangement can not be put in place to ensure that our limited rehearsal time can be used effectively, your child may be removed from the cast. (We do not foresee this as a problem, but want to be prepared if necessary.) There is a zero tolerance policy for bullying. Please contact the Stage Manager if you have any concerns.
- Photographs:** When promoting the show, pictures and videos of the performers are often used in print, video and online media. By signing the form on the following page, you give your permission for your child’s image to be used to promote the show, or other Theatre Sarnia events.

Important Dates	
Bios Due:	_____
Head Shots:	_____
Media Night:	_____
Promo Dates:	_____
Social Dates:	_____

Thank you for supporting your child’s participation in (Production Name)!

Youth Actor Agreement

As a participating Theatre Sarnia Member, I agree to:

- Attend all rehearsals to which I am required
- Be off book by the predetermined date set by the creative team
- When unable to attend rehearsal notification will be given to the Stage Manager - minimum 24 hours in advance
- Participate in at least one media event outside of the predetermined Media Night
- Respect the wishes of the Director, Stage Manager, Executive Director, Production Manager and heads of departments unless it is a safety concern
- Allow the use of my image in the promotion of this production and Theatre Sarnia
- Agree to adhere to any Health and Safety protocols as issued by Theatre Sarnia or the Creative Team
- Behave in a manner that supports the production at all times

If at any time I feel unsafe or uncomfortable I am allowed and encouraged to approach the creative team member I feel most comfortable with and express my concerns.

*As a creative team, (**Director:** (Director name) **Stage Manager:** (SM name) **Producers:** (Producers names)) we agree to:*

- Provide quality blocking that is to the abilities of those who will be performing it
- Provide a safe space for creativity to flourish
- Encourage open and clear communication with the cast and crew
- Provide clear expectations of the cast at the time of auditions; especially if character requirements involve nudity, profanity, emotional turmoil, physical requirements, and physical contact with another cast member

As a Theatre Sarnia Member, I am also privy to the following benefits:

- State of the art facility and Professional staff support
- Lighting and sound
- Costumes, Props, Innovative sets
- Rehearsal space
- Headshots
- Programs
- Professional marketing materials
- Vocal and acting training

Theatre Sarnia: (Production Name) - Youth Actor Agreement and Parent Information Page

Youth Name: (Please Print) _____

Parent/Guardian Name: (Please Print)

I understand that mine and my child's contributions to the production, either positive or negative, may be discussed at Post Production and Production Committee meetings which may impact future decisions.

_____(Initial here) I am aware that my child's picture may be used in print, video and online media in the promotion of the show. I allow the use of the image/video of the above named child to promote the show or for other Theatre Sarnia events. (If you have any concerns, please talk to the Stage Manager in person.)

By signing this agreement I agree to these terms and at any time this agreement can be terminated by myself or the creative team if either party feels necessary.

I have read the Youth Actor Agreement and Parent Information page, and am aware of my and my child's rights and responsibilities with respect to (Show name, Date).

Actor Signature: _____ Date: _____

Signature of Parent or Legal Guardian: _____

Date: _____ Relation to Cast Member: _____

Name and Cell Phone Number of Parent: _____

Name and Cell Phone Number of Alternate Emergency Contact:

Please share any Behavior/Health Issues/Allergies/Medication:

Does your child have any dietary restrictions? If yes, please specify. _____
