



**Creative Dramatics  
Grades K-1 ~ Fall 2011**

**DIRECTOR: Anne Russell**

**REHEARSALS: Wednesdays 4:30-6:00 PM beginning September 7th**

**PERFORMANCES:** Two performances in StageDoor's new theatre for family and friends during the year. Students in this group will also have the option of joining the 101 Dalmations cast to create 101 Dalmations!

**FEES: \$40 per month due Sept—May.** This rate is the cost to participate in the class and covers cost of the theatre use, props, costumes, as well as the instructor's pay. To keep bookkeeping easier for everyone, the monthly fee is the same each month, and may not correlate directly with the number of rehearsal hours in a particular month. Some months will have more hours, some will have less. If your student participates in the production of 101 Dalmations, you will need to provide their shoes, socks, tights, hair care products, and make-up.

**TUITION POLICY:** Tuition is due the first of each month. Please, no cash payments! Payments may be mailed to P.O. box 71, Conifer, CO 80433, or dropped in the tuition slot located just inside the front door at the theatre. **If payment is not received by the 15th of the month, a \$10 late fee will be applied.** If you are receiving a sibling discount, the discount will also be removed when late fee is applied. We recommend setting up automatic bill pay with your bank to avoid late fees, as no other statements or reminders will be sent.

**ATTENDANCE:** Theatre is a collaborative effort, cast members rely heavily on each other, so it is important that all members of the group be present whenever possible. Sorry, no credits are given for missed classes, as StageDoor still incurs the cost associated with the class. In the event of excessive unexcused absences, you may be replaced and no credit given for tuition paid.

Student's Name \_\_\_\_\_ HomePhone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Student's Cell Phone \_\_\_\_\_ Does this phone accept text messages? \_\_\_\_\_

Age \_\_\_\_\_ Birth Date \_\_\_\_\_ School Attending \_\_\_\_\_

\*Email Address for parents AND students: \_\_\_\_\_

\*StageDoor Theatre will not share your e-mail address. It is our primary form of communication so it is very important that we be able to contact you by e-mail. Include as many e-mail addresses as you like to ensure you get our messages.

For Students under 18:

Mother's Name \_\_\_\_\_ Cell/Office Phone \_\_\_\_\_ Text Msgs? \_\_\_\_\_

Father's Name \_\_\_\_\_ Cell/Office Phone \_\_\_\_\_ Text Msgs? \_\_\_\_\_

StageDoor Theatre is a 501(c)3 nonprofit organization. In order to put on a production, many hours go into set building, painting, collecting or making costumes and props, and more.

**Volunteer just 6 hours to one of the following and earn one free ticket to a production. (circle one or more)  
Limit 2 free tickets per family. (Concessions & ushering jobs do not count toward volunteer hours). Free tickets are only available through volunteer work and are not automatically included with participation in the program.**

- Costumes (collecting, sewing, laundering)
- Set building
- Set Painting
- Fundraising
- Set painting
- Collecting / making props
- Fundraising
- Anything—call me!

**I have read and understand all of the above.**

**Parent Signature:** \_\_\_\_\_

**STAGEDOOR THEATRE  
STUDENT MEDICAL EMERGENCY INFORMATION FORM**

**This document is kept in a secure location and only for use in case of an emergency.**

Students Name \_\_\_\_\_ Home Phone \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Age \_\_\_\_\_ Birth Date \_\_\_\_\_

Mother's Name \_\_\_\_\_ Cell Phone \_\_\_\_\_

Father's Name \_\_\_\_\_ Cell Phone \_\_\_\_\_

Please list any other number we should use in case of an emergency during workshop/camp hours: \_\_\_\_\_



**MEDICAL INFORMATION**

List any physical handicaps, chronic ailments, or allergies:

Preferred Physicians  
Name \_\_\_\_\_ Phone \_\_\_\_\_

I give my consent for my family doctor to treat my child in case of emergency or if you are unable to contact him/her, please accept this form as your authority to use for the doctor on call in the emergency room for any necessary emergency medical treatment.

Date \_\_\_\_\_

**Parent or Guardian's Signature** \_\_\_\_\_



# STAGEDOOR

T H E A T R E

## 2010-2011 SEASON

PO Box 71, Conifer, CO 80433 \* 303-886-2819 \* www.stagedoortheatre.org\* billing@stagedoortheatre.org

Name of Group or Production	Monthly Amount	Months Tuition is Due	Total Due to SD	10% Discount if Paid by the first class!	Amount paid
<i>HELLO DOLLY</i> Grades 9-12	<b>\$ 105 per month</b>	Aug. Sept, Oct, Nov, Dec. Please make a note, no additional statements or reminders will be sent.	\$ 525.00	<b>OR \$472.50 paid by Aug. 1st</b>	
<i>CURTAINS</i> Grades 9-12	<b>\$ 105 per month</b>	Dec, Jan, Feb, Mar, Apr Please make a note, no additional statements or reminders will be sent.	\$ 525.00	<b>OR \$472.50 due Nov. 29th</b>	
If participating in both Hello Dolly & Curtains, payments may be made Aug.—May, rather than 2 payments in Dec.					
StageDoor Chorale for Reg. Students	Free for students registered in a musical production. Consistent attendance is required.				
Stage Door Chorale High School—Adult	<b>\$50 Music fee / session</b>	Fall Session: Aug. 25—Dec. 11th Spring Session: Jan. 5—May 6th			
Aladdin Jr. Grades 6-8	<b>\$80 per month</b>	September—March Please make a note, no additional statements or reminders will be sent.	\$560	<b>OR \$504 due September 1st</b>	
101 Dalmations Kids Grades 2-5	<b>\$45 per month</b>	September—May Please make a note, no additional statements or reminders will be sent.	\$405	<b>OR \$364.50 due September 7th</b>	
Creative Dramatics Grades K-1	<b>\$40 per month</b>	September—May Please make a note, no additional statements or reminders will be sent.		No advanced payment discount available	
Acting Out Pre-School	<b>\$20 per month</b>	September—May Please make a note, no additional statements or reminders will be sent.		No advanced payment discount available	

<b>REGISTRATION FEE</b> (one time, nonrefundable annual fee to cover bookkeeping and insurance expenses)	<b>\$25 for first family member, \$5 for each additional family member.</b>	+
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<b>SIBLING DISCOUNT</b>	If this form is for the second or more family member, deduct 10% of this students tuition.	—
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<b>TOTAL DUE WITH REGISTRATION</b>		=
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Credit Card payments:  
 Name on Card: \_\_\_\_\_  
 Credit Card Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_  
 Verification Code on back of card: \_\_\_\_\_

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**PARENTAL PERMISSION**

I give \_\_\_\_\_ my permission to participate in this production and understand that I am financially responsible for the tuition. I have read and understand the tuition policy stated above.

Signed: \_\_\_\_\_ Printed Name: \_\_\_\_\_