

5229 Broadview Road, Richfield, Ohio 44286 Office: (330) 523-6580

Join us in The Revere Lamplighters Winter Performance Workshop! Children will engage in activities that will teach them to be on stage and learn the tools of the actor including vocalization, improvisation, and movement.

All participants will perform in a play or work backstage if preferred. Instruction will also include how casting works; auditioning for parts, theatre etiquette and students will learn how to create sets, work with props, the roles behind the scenes and much more!



Classes held at the Village of Richfield Fellowship Hall 3909 Broadview Road, Richfield Tuesdays and Saturdays October 10th through December 7th Tuesdays – 5:30 pm – 7:30 pm Saturdays – 9:00 am - Noon

Performance Dates December 8th, 9th and 10th Performance Space: Fellowship Hall 3909 Broadview Road, Richfield Registration Fee: \$225.00 Ages 7 – 17

Call (330) 523-6580



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Name of Child:	Nickname:						
Please use a new form for additional famil	ly members						
Age [age range is 7 – 17]:		_Birthdate	/	/			
Child's School:							
Name of Parent/Guardian:							
Address:							
Home:	_Cell:	Addit	ional Cell:				
E-mail:	Additional Email:						
Emergency Contact information (different from caregiver please!):							
Name:	_ Phone:	Relation	nship:				

RLYPG Registrant Agreements:

• Please note that while no previous theater experience is necessary. RLYPG requires that the child have an interest in being involved in the workshop! The workshop will create a supportive and safe environment for the child to try something new; we only ask that they come willing to try and willing to say "Yes!"

• Each child should bring their own bag lunch and beverage each day as well as a beach towel (Classes more than four hours). Children should wear comfortable clothes that allow them to sit, lay and roll on the floor, as well as socks, tennis shoes. No flip flops please! Please label all belongings with your child's name.

• The RLYPG classes and workshops will take place at a location to be determined the designated dates and times.

• I acknowledge that RLYPG may be using REMIND to communicate with parents throughout the program. Remind is a free, safe, and simple messaging tool that helps teachers share important updates and reminders with students & parents. Subscribe by text, email or using the Remind app. All personal information is kept private. Invitations will be sent to use the program.

• Although we would prefer for your child to attend each day of the workshop, we understand that there may be conflicts. Please tell us about those conflicts, if any:_____

Signature of Parent or Guardian:	_Date:						
Payment Information:							
[] Enclosed is my check, payable to The Revere Lamplighters for \$							
[] Credit Card: Visa or MC accepted through Square [®] . \$5 Fee apply. You may call with your credit card info.							
Number:Exp. Date:3-digit Security (Code						

The Lamplighters are a not-for-profit organization under the 501 C 3 IRS code. Please visit our website at www.reverelamplightersyp.org



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PARENTAL CONSENT AND RELEASE FOR PUBLISHING OR SHOWING MINOR CHILD'S STILL OR MOVING IMAGE - I, the parent/guardian of this registered child, understand that from time to time, pictures are taken during the activities at the Revere Lamplighters, or under its direction, then they are presented in various church-sponsored media. These include, but are not limited to: pictures, video productions, newsletters, TV programs, web casts, brochures, handbooks, programs and Internet web pages. This form is to notify you those meetings, events, activities (including rehearsal and classroom settings) are considered public, and they are videotaped or photographed and used in the above listed manner. Further, on occasion a child's image may be singled out and used as an identifiable image. In order for us to use an image of your child where they are not part of a larger group, we ask that you sign the waiver below to grant permission for us to use your child's image. I hereby remise, release and forever discharge The Revere Lamplighters, its agents and employees from any liability for any injury or action against the above-named minor resulting from the use of such pictures, video or other image in any medium utilized. This release includes that The Revere Lamplighters will not be responsible for other user's reproduction, display, distribution or modification of the minor's images in any manner, nor will The Revere Lamplighters be responsible for defamation, misrepresentation, criminal acts by any unauthorized use of The Revere Lamplighters images by third parties. I hereby release to The Revere Lamplighters all rights to copyright this work and or exhibit this work in print or electronic forms, publicly or privately. I also permit them to market and sell copies as necessary. I waive any rights, claims or interest that I or my child may have concerning these images. I understand that I will not be compensated in any way for the use of my child's photograph, whether it is a still or moving image. You have my permission to use my child's image in the media types listed above, as well as any new media formats that are developed in the future. I am at least 18 years of age, I understand the above statement and I am competent and to execute this agreement.

PRINT NAME

_____ DATE _____

PARENT/GUARDIAN SIGNATURE _____

The Lamplighters are a not-for-profit organization under the 501 C 3 IRS code. Please visit our website at www.reverelamplightersyp.org



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Medical Release Form

Child's Name:										
Date of Birth:							Male:		Female:	
Please list any a other medical co should be aware	onditions									
Emergency Contact:			Phone:							
Name(s) of pers Driver's License 1. 2.		nay pi	ck my cł	hild up	o after	class/p	erformai	nce wi	ith Valid	
Parent's or Guar Name:	rdian's									
Address:										
City ST ZIP Code:										
Home Phone:										
Cell Phone:										
E-Mail Address:										

We understand that medical information about you and your child's health is personal, and we are committed to protecting it. A record of this document created and maintained will be on file in case of emergency with The Lamplighters. We are required by law to make sure that medical information that identifies your child is kept private and pledge to do so.