

Holy Family Theatre Group Junior Cast Sign Up Form

Student Name: _____

School: _____ Grade: _____ Homeroom(if HF): _____

Parents' Names: _____

Phone numbers: _____

Parents' Email addresses: _____

My child **CAN** be present on the following show nights:

____ Nov. 16 ____ Nov.17 ____ Jan.18 ____ Jan.19 ____ Feb. 1 ____ Feb.2

If any are left blank, please explain below:

Please list any other time conflicts or Fall Break vacations here:

In order for my child to be considered for a Junior Cast Member, I _____, will commit to one of the following:

____ Performing as a member of the Adult Cast (please fill out Adult Cast form)

____ Serving as a Junior Cast Supervision Chairperson

____ Working on the backstage crew for 6 show nights plus tech and dress rehearsals

____ Working on the tech crew for 6 show nights plus tech and dress rehearsals

____ Volunteering in a combination of junior cast supervision, concessions, and/or ushering for five performances

____ Volunteering with junior cast supervision for three performances

(____ Other - Please contact Julie Hallal - jhallalhollyfamilyeagles.com)

I, (guardian) _____, give permission for (child under 18)

_____ to be photographed during practice and performances, and for those photographs to be used in publicity for Holy Family Catholic Church and School online and in print.

Parent Signature: _____ Date: _____