



## Homeschool Theatre Enrichment: Spring Musical *Review* Registration Packet

Welcome to our Homeschool Theatre Enrichment: Spring Musical Review! We are so excited to be continuing our homeschool program for a second season! We have created this program just for our homeschool students, grades K-8<sup>th</sup>, so that they have a chance to learn and shine together. We are thrilled to partner with you in providing space for your child to grow as a performer and, most importantly, a person.

Our goal for our spring Homeschool program is to make sure that our students receive focused and quality arts training in the three main areas of singing, acting, and dancing. This particular program has been designed to educate our Homeschool students by providing more in-depth instruction in order to help them achieve their goals and grow as both people and performers. Unlike our other shows, this unique program guarantees solo performing experiences for each individual student. Our Homeschool students spend their rehearsal time learning and rehearsing a variety of numbers, which they will present as a Musical Review in a cumulative performance on the OCF stage. With a focus on technique and solo performance opportunities, students will gain tools for continued growth and future success in our program.

Note: Auditions will take place in a group setting the first day of rehearsals. Everyone will receive a role.

***There are no refunds on tuition after 2/19. Should you wish to request a refund, you must do so BEFORE 2/19.***

***Please be aware that there is a non-refundable registration fee of \$50.00 per student.***

### **In order to register, you will need to complete a 3 step process:**

#### **(1) Pre-register on-line at [www.havenartsacademy.org](http://www.havenartsacademy.org)**

Pre-register on Haven Academy's website through your online account. If you have not created an account, please follow the directions on our site. You will not be able to register without creating an account. If you do not pre-register, you will not be allowed to audition. Those who pre-register will be first to audition. You will not be permitted to audition until you have pre-registered.

#### **(2) Print and bring the following forms to the first rehearsal:**

Policies Contract

Registration Form

Cast Commitment Contract

Cast Member Expectations

Parent Expectations and Policies

Medical Release Form

Video/Photo/Website Release (new students only)

\*Please do not arrive to the first day of rehearsal with un-signed forms. You will not be permitted to attend rehearsal if your forms are un-signed.

#### **(3) Pay the \$295 Tuition Fee**

The \$295 tuition fee is due at the time of online pre-registration.

If you would like to request a scholarship, **you must complete and turn in a Scholarship Application by 12/6.**

We hope to see your smiling face at our auditions. We are excited for you to explore all the wonderful benefits a Haven Academy production has to offer!

Looking forward to a great show,

Kelsea Maynard

Elementary Programs Director, Haven Academy of the Arts



## **Policies Contract**

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### **A NOTE ABOUT SCHOLARSHIPS:**

Haven Academy wants everyone to have an opportunity to participate in the arts. If the tuition fee results in a substantial financial hardship for your family, you may want to consider applying for a scholarship. Spring Scholarship Applications are due **December 6<sup>th</sup>** and can be found on the Downloads page of our website. Late applications will not be accepted, and you will not be considered for scholarship without turning in a complete Scholarship Application by **December 6<sup>th</sup>**. We will inform you if we are able to provide you with a scholarship before auditions.

Please note that our applications are now annual; you may apply for financial aid through the end of the season using one application. If you have already applied for a spring scholarship using our annual application, you do not need to reapply.

**There are many reasons our students might require financial aid. Please do not be shy about applying. We offer both partial and full scholarships, and our Scholarship Committee members do their best to provide assistance to all applicants in need.**

### **A NOTE ABOUT SIBLING DISCOUNTS:**

You can find the discount codes for our Sibling Discounts on the registration page of our website, so be sure to utilize those when you check-out online! Sibling discounts are as follows:

First child - full price

25% off second child's tuition

50% off third child's tuition

If full price tuition for multiple children is not a financial hardship for you and your family, you are welcome to donate back the difference for a tax write off.

### **A NOTE ABOUT REFUNDS:**

Should you choose to withdraw from the production, you must communicate your request for a refund, in writing, BEFORE 2/19. After 2/19, there are no refunds.

Scholarship students who choose to withdraw from the production after casting will not be considered eligible for future scholarship. You must withdraw before the first day of rehearsals to avoid penalty.

*Please sign below to indicate that you have read, understood, and will adhere to the above policies.*

X \_\_\_\_\_ Date \_\_\_\_\_  
Parent Signature



# Audition Registration Form

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Child's Name: \_\_\_\_\_

Parent(s) Name: \_\_\_\_\_

Age: \_\_\_\_\_ Birthday: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Grade: \_\_\_\_\_

Please list any performing experience:

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Please list any performing experience:

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Please list *any* potential conflicts that might interfere with the rehearsal schedule. This includes vacations, sports, school commitments, etc. *DO NOT list tech rehearsal OR performance conflicts here. All performance conflicts must be approved by the director PRIOR to auditions.*

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## **Cast Commitment Contract**

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**Rehearsals:** Wednesdays 1:00-3:00 PM starting Wednesday February 19<sup>th</sup> at Legacy Dance Studios: 730 S Allied Way # G, El Segundo, CA 90245

**No Rehearsal:** Wednesday April 8<sup>th</sup> for Spring Break

**Tech Rehearsal:** Friday May 8<sup>th</sup> 1:00-3:00 PM at OCF Church: 343 Coral Circle, El Segundo, CA 90245

**Performance:** Saturday May 9<sup>th</sup> at 7:00 PM (5:00 PM Call Time) at OCF Church: 343 Coral Circle, El Segundo, CA 90245

### **As a Cast Member, I commit to...**

Attend all rehearsals beginning Wednesday 2/19 unless I am sick or have indicated a conflict on my audition form.

Additionally, I commit to attending my Tech Rehearsal and understand that **NO** conflicts are permitted. If a last minute conflict (aside from serious illness) prevents me from attending my Tech Rehearsal, I understand I will not be permitted to perform.

Participate in my performance.

X \_\_\_\_\_  
(Cast Member Signature)



## **Cast Member Expectations**

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Theatre is about fun! But it is also about learning discipline, work ethic and respect. Parents, please take a look at the expectations below and review them with your child.

### **Cast Member Expectations**

- Bring your script to each rehearsal
- Wear comfortable clothing you can dance in (sweats, leggings, leotards, etc.)
- Wear dance shoes or tennis shoes (no flip flops)
- Arrive on time
- Support and encourage your fellow cast members
- Pay attention and listen when a Haven staff member is speaking
- Respect the rehearsal facilities
- Keep language and conversation appropriate
- Clean up after yourself
- Memorize all lines, lyrics and dances on time
- Never touch another cast member's prop or costume
- Sport a good attitude, always
- Always give your best
- Read the announcement board at the sign-in table at each rehearsal
- Contact the director if you are sick or unable to attend a rehearsal: (310) 504-4132

### **\*NEW\* SOCIAL MEDIA AGREEMENT**

I understand that Haven has a zero-tolerance policy for unkind words spoken about other cast members on social media platforms. I understand that this includes discussing casting choices either publically or in group chats on platforms like Facebook, Snapchat, or Instagram, as you never know who might be hurt through my comments. I will only post and share photos or videos of cast members rehearsing or performing if I have their permission. I recognize my responsibility in the Haven community to create a safe environment for my fellow cast mates and agree not to engage in any kind of cyber bullying. I understand that if I choose not to abide by Haven's social media policy that I will be asked to leave the cast.

\_\_\_ **Have read and agree to abide by the above expectations.**

\_\_\_ **Have read and understand the Social Media Agreement.**

X \_\_\_\_\_  
(Cast Member Signature)

Date: \_\_\_\_\_



## **Parent Expectations and Policies**

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### **Parent Expectations**

Check your e-mail for weekly updates

Drop off your child on time; please do not drop your child off more than 10 minutes before rehearsal

Pick up your child on time

Participate in 1 Workday or Performance Parent Volunteer Slot

*Note: Any family member (grandparent, sibling, uncle, cousin, etc.) age 18 and above can substitute for parent participation for either Workdays or Performances.*

### **REFUND POLICY**

Should you choose to withdraw from the production, you must communicate your request for a refund, in writing, BEFORE 2/19. After 2/19, there are no refunds.

Scholarship students who choose to withdraw from the production after casting will not be considered eligible for future scholarship. You must withdraw before the first day of rehearsals to avoid penalty.

### **LATE PICK UP FEE POLICY**

For late pick-ups, a 5 minute grace period will be extended, but after that time, you will be charged \$1.00 per minute late per child.

### **As a Parent, I ....**

**Have read and understand the Parent Expectations**

**Have read and understand the Refund Policy**

**Have read and understand the Late Pick-Up Fee Policy**

**Commit to participate in 1 Workday or Performance Parent Volunteer Slot**

*or*

**Pay the workday non-participation fee of \$50**

X \_\_\_\_\_

*(Parent Signature)*



## **Medical Release**

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Child's Full Name \_\_\_\_\_

Child's Age \_\_\_\_\_

Parents' Names \_\_\_\_\_

Phone \_\_\_\_\_

Cell Number \_\_\_\_\_

Name & phone number of person to contact in the event that the parent/guardian cannot be reached in an emergency

\_\_\_\_\_

In the event that I cannot be reached in an emergency, I hereby give my permission to the physician or dentist selected by the representative of Haven Academy of the Arts to secure proper treatment and/or hospitalization, an injection, anesthesia, or surgery for my child as deemed necessary. The signature of the parent or guardian below is intended to serve as a medical release. It is understood that this authorization is given in advance of any specific diagnosis, treatment or hospital care required and to provide authority and power on the part of an Haven agent to give consent to any and all such treatment and hospitalization deemed advisable. This authorization is to be effective from February 19<sup>th</sup> 2020 through May 9<sup>th</sup> 2020.

### **LIABILITY CLAUSE**

I understand that Haven Academy of the Arts carries only liability coinsurance (secondary insurance). Should my child become injured at a Haven Academy sponsored event, I understand that my own family medical insurance will be billed first. Should my insurance not cover all necessary medical costs, I understand that Haven Academy's insurance policy dictates that I am solely responsible for the difference.

Parent or Guardian's Signature and date

\_\_\_\_\_

Date: \_\_\_\_ / \_\_\_\_ / \_\_\_\_



## Photo, Video, and Website Release Form (New Students Only)

Dear Parent or Guardian:

On occasion, representatives from the Haven Academy wish to photograph, videotape or interview students in connection with Haven Academy programs or events. Educating the public about Haven Academy is one of our objectives. The entire community benefits from knowing about the abilities of our students and about the programs Haven Academy offers to the children in our community.

In order to release student photos, video footage, comments or to post items on the Haven Academy website, we need your written permission.

To give your consent, please complete the form below.

I, \_\_\_\_\_, parent/ guardian of \_\_\_\_\_, give permission for my child to be photographed, videotaped and interviewed by representatives from Haven Academy for the purpose of publicizing the educational programs at Haven Academy. I authorize the use and reproduction, by Haven Academy and anyone authorized by Haven Academy, of any and all photographs, videotapes and interviews taken of my child, without compensation to me or my child. All of these photographs, videos and interviews shall be the property, solely and completely, of Haven Academy. I waive any right to inspect or to approve the finished photographs, videotapes, sound tracks, scripts and printed matter that may be used by Haven Academy.

Date: \_\_\_\_\_

Parent or Guardian Signature: \_\_\_\_\_

Address: \_\_\_\_\_

**OR** \_\_\_\_\_ I am 18 years of age or older and I give my consent without reservations to the foregoing on my own behalf.

Signature: \_\_\_\_\_

Address: \_\_\_\_\_