## **THEATRE33 / Studio33 Intro to Theater: Registration Packet**

- 1. Theatre33 Instructions Information Only
- 2. Theatre33 Registration Form Fill & Sign
- 3. Student's Code of Conduct and Participation Agreement Review & Sign
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# THEATRE33: Intro to Theater Registration Instructions

Welcome to Theatre33 and Studio33. Enclosed you will find the necessary information and materials to register for the upcoming education programs.

#### **KEY DATES**

- April 1, 2024- Registration begins
- April 1 June 19, 2024 Duration

If classes are canceled by Theater 33, they will be rescheduled.

#### **FEES:**

- New Student Registration fee: \$50 PER STUDENT (NO discounts may be applied).
- Class fees:
- \$500/session or three payments of \$180

#### **PAYMENT TERMS:**

- Full session payments only are eligible for a discount (\$40 less than installment payments)
- Monthly payments  $1^{st}$  payment at registration/beginning of session; Subsequent payments will be invoiced every four weeks and need to be paid within 5 days.
- Late payments will incur a \$15 late fee.

#### **DISCOUNTS:**

Family Discount: 10% discount on class tuition fee for siblings. <u>NOTE: ALL NEW STUDENTS PAY</u> THE FULL REGISTRATION FEE.

#### **HOW TO REGISTER:**

All forms can be e-signed or printed out and signed and delivered to Theatre33 during registration or when joining the class. Checks are to be made payable to Theatre33, and can be delivered in person or mailed to: Theatre33, 243 169th Ave NE, Bellevue, WA 98008. We can also accept payment via credit card and you have an option to set up autopay.

#### **ADDITIONAL INFORMATION:**

<u>Session Commitment</u> - Upon registration, students are committing to the entire session (Fall, Winter or Spring). Class fees **will not be refunded** if students withdraw during the session. If the monthly payment option is used, **the remaining session fees will still be due**. **We do not** 

### issue prorated refunds for missed classes.

<u>Billing</u> – Currently, we are able to accept tuition payments by cash, check, credit cards and Paypal. You can also choose to sign up for autopay.

\*\* Monthly Payments - Second and Third months payments will be invoiced and will be due in the event that the student withdraws during the session. There are no prorated refunds for missed classes.

## THEATRE33 Youth Group Student Registration Form

(one form per student)

STUDENT'S NAME (print)		Age
Preferred Name:		
Home Phone #	Cell Phone #	
Email Address		
Street Address		
City Zip Code	e	
Parent(s) or Guardians Name(s)		
School District Student Attends		
Person to be notified in case of emerge	ency, if parent unavailable	
Name	Phone #	
Does the student have any allergies, ill would like to share?		•

ALL CLASS CORRESPONDENCE WILL BE VIA E-MAIL ADDRESS, PARENT PHONE NUMBER(S) PROVIDED or VIA META MESSENGER

## **Student's Code of Conduct and Participation Agreement**

Congratulations! You are about to be a part of some	thing really special!
Parents, please take the time to read the following w	vith your actors. When you finish, sign that you
both have read and understand what will be expecte	ed during the classes. Theatre is fun and creative,
but is also a big commitment. Your director and your	fellow actors want you to succeed. To be
successful you are expected to be at every rehearsal,	/class.
I (actor's r	name) and
(parent's	name) understand that,
• I will follow the rules and be respectful of my instr	ructor and my fellow actors.
• If I have any problems or questions I can always ta	lk to the instructor before and after class.
• Like all performing arts, it takes practice outside of	f rehearsals. I will come prepared with the work
the instructor has assigned.	
I will challenge myself to make new friends and ha	eve new experiences. I will treat all actors as my
friends and support them through this adventure.	
• I will have fun and keep communicating with all th	e adults that are here to help me.
• If I know that I have to be absent, running late, or	leave early, I will tell my instructor beforehand.
Unacceptable Behavior:	
Refusing to follow the guidelines and rules	<ul> <li>Using profanity, vulgarity or obscenity</li> </ul>
Stealing or damaging property	Disrupting the program
STUDENT	DATE
PARENT/GUARDIAN	DATE

### **Parent's Code of Conduct**

As parent(s) of a Student of Theatre33 Youth Group, I/we agree to the following:

#### **General Guidelines:**

- Treat instructors, parents, facility staff, and students courteously and with respect at all times. Let the words you speak be uplifting to that person.
- Stay informed by reading all class communications.
- Keep my contact information up to date and regularly monitor my email for class information.
- Encourage/ensure my student(s) attend classes regularly and punctually.
- Communicate any concerns or suggestions directly to my student's instructor or the Youth Education Program Director.
- Should I choose a monthly payment option, to submit payment within 5 days of receiving the invoice.
- In the event that my student(s) chooses to discontinue attendance mid session, I understand that I am still responsible for the remaining monthly payments.
- Respect the instructor's decision with regards to teaching. If I have a concern that I feel is not being addressed by the instructor, and I feel that I am not able to communicate my concern with the instructor, I will contact the Youth Education Program Director.

By signing this form, I am committing to meeting the guidelines and expectations contained herein. I understand that failing to do so may result in actions taken by Theatre33 staff and management as deemed appropriate.

Parent/Guardian Signature:	Date:	
Parent/Guardian Signature:	Date:	

# <u>Theatre33</u> **Photo and Video Release Authorization**

I grant to Theatre33 the right to take photographs and/or video of me and my family in connection with their classes, performances, parties and events. I authorize Theatre33, its assignees and transferees to copyright, use and publish the same in print and/or electronically. I agree that Theatre33 may use such photographs and/or videos of me and my family with or without my name and for any lawful purpose, including, for example, such purposes as publicity, illustration, advertising, social media and web content and grant applications. I will speak with management to discuss my options

I have read this Photo and Video Release Authorization and understand all its terms. I execute it voluntarily and with full knowledge of its significance.

By signing below, I grant authorization to use photographs and/or video.				
Print name of Participant	Print name of Guardian			
Signature of Participant or Guardian	 	_		