

**stagesINTHEARTS** (AKA Woodstock Youth Theater)  
at bsp - 323 WALL STREET  
KINGSTON, NY 12401  
845.338.8700

**REGISTRATION FORM**

ACTOR'S NAME \_\_\_\_\_  
(Last) (First)

GRADE \_\_\_\_\_ AGE \_\_\_\_\_ BIRTHDATE \_\_\_\_\_ SCHOOL \_\_\_\_\_

ADDRESS \_\_\_\_\_ ACTOR'S E-MAIL \_\_\_\_\_

ACTOR'S CELL \_\_\_\_\_ ACTOR'S HOME PHONE \_\_\_\_\_

**PARENT INFORMATION:**

MOTHER'S NAME \_\_\_\_\_ HOME PHONE \_\_\_\_\_

Mom's email \_\_\_\_\_ Work # \_\_\_\_\_ CELL \_\_\_\_\_

FATHER'S NAME \_\_\_\_\_ HOME PHONE \_\_\_\_\_

Dad's email \_\_\_\_\_ Work# \_\_\_\_\_ CELL \_\_\_\_\_

IN CASE OF EMERGENCY \_\_\_\_\_ PHONE \_\_\_\_\_  
(Other than parent)

DOCTOR'S NAME \_\_\_\_\_ PHONE \_\_\_\_\_

DENTIST'S NAME \_\_\_\_\_ PHONE \_\_\_\_\_

HOSPITAL PREFERENCE \_\_\_\_\_  
Does your child have any allergies or health related issues? Please describe:

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**MEDICAL CONSENT: IN CASE OF A MEDICAL EMERGENCY, EVERY EFFORT WILL BE MADE TO CONTACT THE PARENTS. IN THE EVENT YOU CANNOT BE REACHED, WE NEED PERMISSION TO TREAT YOUR CHILD.**

I \_\_\_\_\_ Mother/Father/Guardian of \_\_\_\_\_  
give permission to STAGES, aka WYT to seek medical attention for my child in case of an emergency.

In no event will Woodstock Youth Theater, Inc., Backstage Studio Productions, Inc. or Msteri Realty, Inc. be held liable for any special, consequential, incidental, direct or indirect damages arising from my child's participation in any class or program.

SIGNED: \_\_\_\_\_ DATE: \_\_\_\_\_

***“SHOW BUSINESS”--- IMPORTANT NOTE TO PARENTS:*** (Please read the following & sign)  
STAGES, aka Woodstock Youth Theater is a not-for-profit 501 (c) 3 organization that has been an icon in the Hudson Valley for over 20 years. Our mission is to provide stimulating and engaging programming and education to the Youth of our communities, drawing students from diverse ethnicities and locations. Your contributions are 100% tax deductible. BSP does NOT share any of the proceeds from the Youth Theater program & in fact, is the largest contributor to the program. Your contribution pays each show's directorial and technical staff and SOME of the expenses to mount a production. The Board of Directors and every other worker are unpaid volunteers, work trades and parents such as yourselves

Acknowledgement is given to the significant investment made toward the actors' participation in Youth Theater. Unfortunately, tuition covers only a fraction of the costs for production values. We depend heavily on donations, playbill ads & grants and the valuable donation of time from parents and volunteers to cover ever-rising expenses. Without them, productions could not succeed. Ticket sales are a major source of income & parents and friends are the primary ticket purchasers. We hope you can appreciate our policy that every person attending a performance, including parents and siblings must purchase a ticket. Committee members, volunteers and advertisers receive a pre-arranged number of free tickets. Additionally, parent/sibling (only) tickets can be purchased in bulk to realize a substantial savings.

If you know of a business or individual that might fund a scholarship for a needy actor, or donate equipment to any of the myriad of construction or production needs, please let us know or have them contact us. And please consider making us a part of your yearly charitable donations and gift giving. All support is vital & every little bit helps. Thank you for your understanding and continued support.

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Acknowledged - Parent Signature

<b>BASE TUITION</b>	<b>\$ 355.00</b>
<b>Family discount of 20% for each additional child.</b>	
<b>Sibling discount or Approved Work/Trade</b>	<b>DISCOUNT (-) _____</b>
<b>Video of Performance (No other Videotaping is permitted) \$25.00 (must be paid at registration)</b>	<b>(+) _____</b>
 <b>A \$20 insurance fee is required for all registrations, and must be paid before rehearsals /classes begin, including work trades and scholarships.</b>	
<b>INSURANCE</b>	<b>+ 20.00</b>

Administrative Fee:    Plan B= \$15.00,    Plan C = \$20.00            Fill in appropriate fee            \$ \_\_\_\_\_

**PAYMENT METHOD:**    CASH Amount \_\_\_\_\_    CHECK # \_\_\_\_\_    **Tuition TOTAL**    \$ \_\_\_\_\_

**PAYMENT PLAN A:**    \_\_\_\_\_ I AGREE TO PAY IN FULL AT REGISTRATION.

**PAYMENT PLAN B:**    \_\_\_\_\_ I AGREE TO PAY \$195.00 NOW AND \$195.00 AT ON 11//16/11.

**PAYMENT PLAN C:**    \_\_\_\_\_ I AGREE TO PAY \$140.00 NOW and \$130.00 ON 10/15/11 and \$130.00 ON 11/16/11.

**TO ASSURE ULTIMATE PRODUCTION VALUES, AND FACILITATE THE CULMINATION OF THE SHOW, TUITION MUST BE PAID AS AGREED.    PARTICIPATION WILL BE INTERRUPTED IF CONTRACT IS BREACHED**

\_\_\_\_\_ I would like to apply for a work trade. In order to be eligible, a Work Exchange Application must be submitted with Registration. Some of the above Committee categories can be considered for Work Trade.

**I have read the Registration Form and agree to the payment terms. By registering my child in this program, I agree to allow any photos, videotapes, audio recordings, etc. of my child to be used for promotional purposes.**

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(Signature)