

YOUNG ARTISTS ENSEMBLE / CONEJO THEATRE FOR EVERYONE

403 W. HILLCREST, THOUSAND OAKS, CA 91360

CAST INFORMATION (805) 381-2747 / TICKET INFORMATION: (805) 381-1246 / E-Mail: YAEinfo@crpd.org

PARTICIPANT ACTING CONTRACT FOR

DISNEY'S FREAKY FRIDAY

To ensure a successful production, we have found it helpful to list the responsibilities of those involved.

We have developed the following set of guidelines:

1. Please be aware that with the often-changing current events, we may well find as we rehearse that some of these rules do not apply at all or need to be adapted to our 2022 spring reality. In the end, this is an agreement that we are all on the same side with the same goals—productive rehearsal time, a rewarding and safe experience, and a performance we can be proud of.
2. **We will rehearse in-person indoors. While all participants and production staff and crew are welcome to wear masks as their comfort level dictates, we will not be requiring masks or distancing in rehearsals and plan to perform unmasked in May.**
3. We will adhere to city, county, state, and federal health guidelines and as they evolve over the next two months, we may institute new rules or procedures accordingly. Please read over the attached **YAE's Disney's Freaky Friday Safety during the Coronavirus Pandemic.**
4. All participants are expected to attend all rehearsals for which they are scheduled, as well as all performances. The exception that is especially vital during this time – if you are ill or have tested positive for COVID-19, please do not attend in-person rehearsals.
5. Rehearsals will run on schedule and participants should be picked up on time.
6. **MISSED REHEARSALS MUST BE APPROVED IN ADVANCE.** If you have an important doctor's appointment, etc., you must notify the staff well in advance of the appointment by completing a **Request to Miss Rehearsal Form. Give these forms to the Assistant Director, Rianny Vasquez.** You can also e-mail Rianny at riannyvasquez@gmail.com. If you are suddenly ill, call Rianny at **805-231-0204. (Please put this contact information in your address book/contacts now!)**
7. Major conflicts with the rehearsal schedule can make continued participation ultimately impossible. While it is our goal to create a positive experience for everyone, major conflicts impact the entire cast. As a last resort, it may be necessary to recast your role or drop you from the production.
8. **Beginning April 28, 2022, with very limited pre-arranged exceptions, NO REHEARSALS OR PERFORMANCES CAN BE MISSED.** All rehearsals from this date are full run-throughs, dress/tech rehearsals, or performances. **Rehearsals & performances will take place at the Hillcrest Center for the Arts, 403 W hillcrest Drive, Thousand Oaks, CA 91360.**
9. Scripts and a pencil must be brought to all rehearsals.
10. Food and beverages may not be eaten inside the rehearsal rooms. If participants bring food to rehearsals, the food may be eaten during scheduled break periods in designated areas.
11. The Young Artists Ensemble maintains a strict **NO SMOKING** policy. In keeping with health precautions against secondary smoke, no participant, employee, or volunteer may smoke during the time that they are participating in this program.
12. No Participant, volunteer, or staff may participate in any rehearsal or performance under the influence of drugs or alcohol. Anyone under the influence will be removed from the program.
13. Participants are expected to have respect for the facilities in which they rehearse and perform.
14. Participants are expected to treat each other, the production staff, and volunteers with respect and courtesy.
15. Participants are expected to show respect for the production staff and for the authors. **THERE CAN BE NO UNAUTHORIZED ALTERATIONS TO THE TEXT AS REHEARSED, OR PERFORMANCE AD-LIBS.**

16. The participant and at least one parent of each participant must attend a meeting **6:00 to 7:00pm on Thursday, March 10, 2022**, at the Hillcrest Center for the Arts, 403 W. Hillcrest Drive in Thousand Oaks. Participant/parent responsibilities and volunteer needs will be discussed at this meeting. **Forms will be available on the Cast Info page at YAEonline.com and copies will also be available at the meeting. There will be a cast meeting BEFORE the parent meeting at 5:30pm.** Parents will be welcome to fill out and/or turn in paperwork during this 30-minute meeting if they choose to wait.
17. We ask one parent or guardian to work as a production volunteer at least once. Production jobs include ushers, poster/pizza day drivers, set construction, costume construction, cast party coordination, set strike, and backstage supervisors (backstage supervisors must be fingerprinted).
18. All cast and production staff are expected to keep in-person and online interactions related to the show positive and family friendly. Participants are encouraged to tag themselves in photos and postings but should avoid tagging other minors without express permission.
19. **A Participant Fee of \$210.00 is due at or before the Cast/Parent Meeting.** This fee helps cover costume construction and rental costs, and production costs such as sets, props, and director fees. Financial Assistance in the form of fee waivers or payment plans is available. Fill out the **Request for Financial Assistance Form** or contact the Producer, Megan McDonough at (805) 381-2747 to arrange assistance.
20. Scripts for this show will be distributed at the parent meeting after all required paperwork, participation fee and/or Financial Aid forms are turned in.
21. Our Costumer will provide a list of personal items each participant must provide for themselves (shoes, tights, etc.). **With the exception of these personal items, all costumes will remain the property of the Young Artists Ensemble and must be returned at the end of the production. All cast members are to wear tight fitting (bike/booty) shorts and an undershirt, camisole, or tank top under their costumes. Shorts and top should be as close to skin tone or costume colors as possible. These will be needed for fittings and every time costumes are worn. No one should be undressing beyond these shorts and undershirts.**
22. Each participant must provide their own stage makeup. Information will be provided regarding stage makeup and hairstyles.
23. Please do not make significant changes to your personal appearance (Hair Color or Style etc.) without discussing the change with the Director.
24. **VIDEOTAPING THE SHOW/INVITED DRESS REHEARSAL:** Families are invited to come watch the Final Dress Rehearsal at 7:30pm on **Thursday, May 5, 2022**. We can provide up to 2 spots per performance for recording. Please contact Associate Producer, Natalie De Savia, to reserve a videotaping spot. We will also record the show and make copies of the recording for everyone.
25. **PHOTO CALL:** On **Sunday, May 8, 2022**, we will have a PHOTO CALL before the Matinee Performance at approximately **11:30am**. Parents wishing to take pictures should arrive by **11:15am**. We will set up a group photo & individual moments. You must bring your own camera with flash. PHOTO CALL will end by **1:00pm**.
26. The participants and parents/guardians agree that publicity and production photos may be taken and used for publicity purposes in print media, video media, and Internet media without restriction.
27. **T-SHIRTS:** T-Shirts can be purchased through the First Meeting Paperwork page at YAEonline.com. Please complete the Google Form, prior to making your actual purchase, so we have your requested size(s). T-Shirts are \$20 each. **Order deadline is March 25, 2022.**
28. **Show times are 7:30pm Fridays and Saturdays and at 2:00pm on Saturdays and Sundays, March 6, 7, 8, 13, 14, 15, 20, 21, & 22, 2022. All performances will take place in the Theatre at the Hillcrest Center for the Arts.** Tickets are on sale now and may be purchased before or after the Parent/Cast Meeting. You may purchase tickets online at YAEonline.com or HillcrestArts.com. The Hillcrest Center Office will be open from 9am to 5pm, Monday through Friday, for ticket sales, plus evenings and weekends when it is open for activities. You may also call (805) 381-1246 and pay with a credit card. **Reserved Seating Ticket Prices: \$19 for Adults and \$16 for Children/Student/Seniors. \$12 Discount Fridays!** A 10% Group Discount for groups of 10 or more per performance is also available. **GROUP SALES CANNOT BE CHANGED ONCE ORDERED.**

AGREEMENT, WAIVER, AND RELEASE

In consideration for being permitted by the Conejo Recreation & Park District (“CRPD”), City of Thousand Oaks (“CTO”), Conejo Open Space Conservation Agency (“COSCA”), Conejo Valley Unified School District (“CVUSD”), and City of Westlake Village (“WLV”) to participate in the above activities, I hereby waive, release, and discharge any and all claims for damages for personal injury, death, or property damage which I may have, or which may hereafter accrue to me, as a result of participation in said activities. This release is intended to discharge in advance the CRPD, CTO, COSCA, CVUSD, and WLV (collectively “entities”) (including their officers, employees, volunteers, and agents) from any and all liability arising out of or connected in any way with my participation in said activities, even though that liability may arise out of active or passive negligence or carelessness on the part of the persons or entities mentioned above.

It is further agreed that this waiver, release, and assumption of risk is to be binding on my heirs, administrators, executors, and assigns, and that I shall indemnify and to hold the above persons or entities (including its officers, employees, volunteers, and agents) free and harmless from any loss, liability, damage, cost, or expense which may arise out of or is connected in any way with my participation in said activities.

Additionally, I fully understand that my participation in the above-referenced activities exposes me to the risk of personal injury, death, communicable diseases, illnesses, viruses, and/or property damage. I hereby acknowledge that I am voluntarily participating in this activity and agree to assume any such risks.

VIRTUAL CLASS RELEASE: I hereby warrant and agree, that the conditions of my environment are safe, free from obstructions, and are suitable for participation in the above-referenced activity. I further understand and agree that any material downloaded, viewed or otherwise obtained through my participation in said activity is done at my own risk and the District is not responsible for any loss, alteration, corruption or other damage to my personal property, including computers, networks and other property used as part of my participation.

PHOTOGRAPHIC RELEASE: I understand that photographs may be taken during these activities and hereby grant the District permission to use any such photo(s) for advertising or in promotional materials.

PARENTAL/GUARDIAN CONSENT: *(to be completed and signed by parent/guardian if participant is under 18 years of age)* I hereby consent that those listed above participate in the above activities, and I hereby execute the above Agreement, Waiver, and Release on his/her/their behalf. I state that said minors are physically able to participate in said activities. I hereby agree to indemnify and hold the persons and entities mentioned above (including their officers, employees, volunteers, and agents) free and harmless from any loss, liability, damage, cost, or expense which may arise out of or is connected in any way with said minor/s’ participation in said activity.

I UNDERSTAND THAT IMPORTANT INFORMATION is available regarding 1) concussions that may occur during physical activities, and 2) information regarding the use of opioids, and acknowledge receipt of the information via www.crpdp.org/concussion and www.crpdp.org/opioid.

CONSENT FOR EMERGENCY MEDICAL TREATMENT: As the participant or the parent, legal guardian, or appointed conservator of the participant of this program, I hereby give consent to the Conejo Recreation & Park District to obtain all medical or dental care for myself or my dependent as prescribed by a duly licensed medical professional. This care may be given for whatever conditions are necessary to preserve the life, limb, and well-being of myself or my dependent.

I UNDERSTAND THAT THE CONEJO RECREATION AND PARK DISTRICT HAS A CODE OF CONDUCT (www.crpdp.org/conduct) AND AGREE TO ABIDE BY ITS POLICIES AND CONDITIONS.

I HAVE CAREFULLY READ THIS AGREEMENT, WAIVER, AND RELEASE AND FULLY UNDERSTAND ITS CONTENTS. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT BETWEEN MYSELF AND THE ABOVE ORGANIZATIONS AND I SIGN IT OF MY FREE WILL.

PARTICIPANT NAME

PARENT SIGNATURE

DATE

PRINT, FILL OUT, AND RETURN THIS PAGE AT THE PARENT/CAST MEETING

**Participant and Parent Agreement to
PARTICIPANT ACTING CONTRACT for DISNEY'S FREAKY FRIDAY**

SIGN AND RETURN THIS COPY

An AUTHORIZATION FOR TREATMENT OF A MINOR form is attached. Please fill out this form and return it with the ACTING CONTRACT. **PARTICIPANTS AGED 18 OR OLDER MAY SIGN THEIR OWN FORMS.**

PARTICIPANT NAME: _____

(A) I certify that this performer is at least 10 and not 20 on **5/22/22**

(B) PERMISSION FOR PARTICIPANTS UNDER AGE 18 TO BE ON THEIR OWN RECOGNIZANCE (COMPLETE FOR ALL PARTICIPANTS UNDER AGE 18) during rehearsal or performances. Understanding that supervision is not provided before and after rehearsals and performances, I, the parent/legal guardian of the child listed above GIVE/DO NOT GIVE permission for said minor to be released to his/her own recognizance before and after rehearsals and performances of **DISNEY'S FREAKY FRIDAY** (*Walk or bike home, walk to the mall, wait for pick-up alone.*)

Check One: Give Permission Do Not Give Permission

(C) Participant Name as you would like it to appear in the program: _____

Parent/Guardian Name(s): _____

List the Parent(s) or Guardian(s) that should be our primary contact

(E) I understand that my address, phone number and e-mail will be listed on the contact sheet distributed to the cast unless I call the Hillcrest Center for the Arts Office by 5pm, Friday, 3/11/22 and request not to be listed.

Address: _____

Street

City/State

Zip Code

Parent Telephone: Best _____ Alternate _____

Parent(s) E-Mail(s): _____

Cast Member E-Mail Address: _____

Cast Member Cell #: _____ Participant's School: _____

Other Parent or Guardian Names: _____

That Should Receive Rehearsal Update Information

Address: _____

Street

City/State

Zip Code

Parent Telephone: Best _____ Alternate _____

Other Parent/Guardian E-Mail Address: _____

(F) I HAVE READ THE CONTRACT, UNDERSTAND THE OBLIGATIONS REQUIRED OF ME AND AGREE TO ABIDE BY THEM DURING REHEARSALS AND PERFORMANCES.

PARTICIPANT Signature/Date

PARENT/GUARDIAN Signature/Date