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YOUNG ARTISTS ENSEMBLE
403 W. HILLCREST
THOUSAND OAKS, CA 91360
CAST INFORMATION (805) 381-2747, FAX (805) 370-1341
TICKET INFORMATION: (805) 381-1247
E-Mail: info@YAEonline.com

PARTICIPANT ACTING CONTRACT FOR
THE WITCH ACADEMY

In order 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 2020 fall 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 experience, and a performance we can be proud of.
2. We will rehearse and perform virtually over ZOOM for this production. Participants (parents) must provide their own web camera, web capable microphone, speakers (mostly earbud style), and high-speed internet for use during rehearsals & performances. We ask that each family agree to reduce their internet use to Zoom only during dress rehearsals and performances to provide the best possible performance for all.
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.
4. All participants are expected to attend all rehearsals for which they are scheduled, as well as all performances.
5. Rehearsals will run on schedule and participants and production staff should sign in on time and will be released on time.
6. Major conflicts with the rehearsal schedule are not acceptable. 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.
7. **MISSED REHEARSALS ARE NOT ACCEPTABLE** unless approved in advance. If you have an important doctor's appointment, etc., you must notify the staff well in advance of the appointment by sending an email to **Assistant Director, Chris Clyne** at: witchacademyad@gmail.com. This email must list the date of the conflict and the reason. Production Staff will get back to you within 24 hours to approval or deny your request. If you are suddenly ill, call (805) 381-2747 and ask to be transferred to Chris.
8. **Beginning October 19, 2020, NO REHEARSALS OR PERFORMANCES CAN BE MISSED.** All rehearsals from this date are full run-throughs, dress rehearsals, or performances.
9. Scripts and a pencil must be brought to all rehearsals.
10. Lateness is not acceptable.
11. 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.
12. 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.
13. 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.
14. The directors and staff cannot provide transportation. A cast list will be available to help organize carpools.
15. Participants are expected to have respect for the facilities in which they rehearse and perform.
16. Participants are expected to treat each other, the production staff, and volunteers with respect and courtesy.

17. Participants are expected to show respect for the production staff and for the author. **THERE CAN BE NO UNAUTHORIZED ALTERATIONS TO THE TEXT AS REHEARSED, OR PERFORMANCE AD-LIBS.**
18. The participant and at least one parent of each participant must attend a meeting **6:00 to 7:00pm on Thursday, September 10**, via ZOOM. Participant/parent responsibilities and volunteer needs will be discussed at this meeting.
19. All cast and production staff are expected to keep 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.
20. **A Participant Fee of \$185.00 is due by the Cast/Parent Meeting at 6:00 on Thursday, September 10, 2020.** This fee helps cover scripts, costume construction and rental costs, and production costs such as sets, props, and director fees. You can choose to pay this fee in full upfront or you can choose Automatic Credit Card Payments and pay half up front (\$92.50) and the second \$92.50 will be automatically charged to your credit card on 10/30/2020. Financial Assistance in the form of fee waivers or alternate payment plans are available. Click on the **Request for Financial Assistance Form** link on YAEOnline.com or contact the Producer Megan McDonough at (805) 381-2747 to arrange assistance.
21. The Director 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.**
22. Each participant must provide his or her 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. **HEADSHOTS/PROP & COSTUME PICKUP:** Once the costumes and props are ready, the cast will need to come to the HILLCREST CENTER FOR THE ARTS to pick them up. We will also have our photographer set up at an easy to access location at the top of the stairs to quickly take cast headshots. We ask that everyone remain in their vehicle during this process, and only cast exit their cars one at a time for their photos to be taken. Please be sure to wear masks (they will be removed briefly for photos). **This date is currently TBA;** we will let you know as soon as everything is ready for pickup.
25. The participants and parents/guardians agree that publicity and production photos and videos may be taken and used for publicity purposes in print media, video media, and Internet media without restriction.
26. **Show times are 2:00pm on Saturday & Sunday and 7:00pm on Friday & Saturday, November 6-8, 2020. All performances will take place on YouTube Live via ZOOM.** Tickets are on sale now and may be purchased before or after the Parent/Cast Meeting. You may purchase tickets online at HillcrestArts.com. The Hillcrest Center Office will be open from 9am to 5pm, Monday through Friday, for over the phone ticket sales at (805) 381-1246. We accept AMERICAN EXPRESS®, DISCOVER®, MASTERCARD®, or VISA®. **Streaming Ticket Price is \$13. There is a possibility we may offer a drive-in movie option for the evening performances, however, that will be determined at a later date.**

Please sign Page 3 & complete Page 4 (**Note: BOTH Participant and Parent Need to Sign**) and drop off this contract at script pickup.

PRINT, FILL OUT, SIGN AND RETURN THIS PAGE AT SCRIPT PICK UP

**Participant and Parent Agreement to
PARTICIPANT ACTING CONTRACT for THE WITCH ACADEMY**

Participant Name: _____

AGREEMENT, WAIVER, AND RELEASE

In consideration for being permitted by the Arts Council of the Conejo Valley and its cooperating agency (the Conejo Recreation & Park District) to participate in the Young Artists Ensemble Youth Theater Program, 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 Arts Council of the Conejo Valley and its cooperating agency (the Conejo Recreation & Park District (their officers, employees, 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 negligence or carelessness on the part of the persons or entities mentioned above. It is understood that these activities involve an element of risk and danger of accidents and knowing those risks I hereby assume those risks. It is further agreed that this waiver, release, and assumption of risk is to be binding on my heirs and assigns. I agree to indemnify and to hold the above person or entities free and harmless from any loss, liability, damage, cost, or expense which they may incur as the result of my death or any injury or property damage that I may sustain while participating 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 PROGRAM 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 Arts Council of the Conejo Valley and its cooperating agency (the Conejo Recreation & Park 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.

PARENTAL CONSENT: *(to be completed and signed by parent/guardian if applicant is under 18 years of age)* I hereby consent that those listed as registered 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 free and harmless from any loss, liability, damage, cost, or expense which they may incur as a result of the death or any injury or property damage that said minors may sustain while participating in said activities.

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 from our partner agency, the Conejo Recreation & Park District via www.crpd.org/concussion and www.crpd.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 Arts Council of the Conejo Valley 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 ARTS COUNCIL OF THE CONEJO VALLEY REQUIRES THE USE OF THE CONEJO RECREATION AND PARK DISTRICT CODE OF CONDUCT (www.crpd.org/conduct) AND YOU 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 ARTS COUNCIL OF THE CONEJO VALLEY AND ITS COOPERATING AGENCY (THE CONEJO RECREATION & PARK DISTRICT) AND I AGREE/SIGN IT OF MY FREE WILL.

PLEASE NOTE: Arts Council of the Conejo Valley often takes photos of participants during classes and special programs, as well as other activities both schedule and unscheduled. These photos may be used for publicity purposes on the ACCV's and CRPD's printed materials as well as online at HillcrestArts.com, YAEonline.com, and CRPD.org and on other ACCV and Hillcrest Center for the Arts related Facebook or other social media.

PARTICIPANT NAME: _____

PARENT/GUARDIAN NAME: _____

PARTICIPANT Signature/Date

PARENT/GUARDIAN Signature/Date

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PARTICIPANT NAME: _____

(A) I certify that this performer is at least 7 and not 15 on **11/8/20**

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

(C) T-SHIRTS Production T-shirts are optional. They cost \$20 and must be ordered online in advance.
To view and order a Production T-Shirt go to www.YAEonline.com. **Orders due by 9/25/20**

Sizes: Youth Small Youth Medium Youth Large
 Adult Small Adult Medium Adult Large Adult XL Adult 2X Adult 3X Adult 4X

(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, 9/11/20 and request not to be listed.

Parent/Guardian Names: _____
List at least one Parent or Guardian with whom you live.

Address: _____
Street City Zip Code

Parent Telephone: Best _____ Alternate _____

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

Cast Member E-Mail Address: _____

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

Other Parent or Guardian Names: _____
That should receive emails

Telephone: Best _____ Alternate _____

E-Mail Address: _____