

Trumbull Parks & Recreation
T Y A Summer Theater 2023 – ANASTASIA
CAST / CREW Permission Form

Cast/Crew Member information:

Name _____ CAST _____ CREW _____

Age _____ Date of Birth _____

School _____ Grade _____ (entering Fall 2023)

Cell Phone _____ Email: _____ Home Phone: _____

Address _____

1) Parent / Guardian Information: Parent's Name _____

Home Phone: _____ Cell: _____

Email: _____

Address (if different than above): _____

2) Parent / Guardian Information: Parent's Name _____

Home Phone: _____ Cell: _____

Email: _____

Address (if different than above): _____

Emergency contact list (Please list in the order we should call)

1) Contact Name _____ Contact Phone Number _____

Contact relationship to Cast/Crew _____

2) Contact Name _____ Contact Phone Number _____

Contact relationship to Cast/Crew _____

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ATTENDANCE:

I understand that rehearsal time is very short and attendance is very important. Absences should be limited to 2 missed rehearsals. Additional absences should be approved by the Director and Producers.

Absence/Conflict Dates:

Please share any Food allergies or illnesses that you want us to be aware of:

Waiver of Participant by parent: In consideration of your accepting my or my child's registration and entry, I hereby for myself, my child, my heirs, executors and administrators, waive and release any and all rights and claims for damages I or my child may have against the Town of Trumbull or the Parks and Recreation Department; and its representatives, successors and assigns, for any and all injuries suffered by myself or my child at the activity sponsored by these groups. I understand there is inherent risk associated with the activity and authorize emergency medical treatment and transportation in my absence.

PHOTO RELEASE: THE TRUMBULL PARKS AND RECREATION DEPARTMENT MAY VIDEOTAPE OR TAKE PHOTOGRAPHS OF PARTICIPANTS ENROLLED IN RECREATION ACTIVITIES, CLASSES OR PROGRAMS. THESE PHOTOS AND/OR VIDEOTAPES MAY BE USED FOR PROMOTIONAL PURPOSES. I certify by my signature that I am the custodial parent or guardian; or I have the expressed authorization of the custodial parent, or guardian to enroll said participant(s) in the specified activities listed.

Parent/ Legal Guardian signature is required for all students under the age of 18

Signature _____ **Date** _____

Cast Members 18 and older:

I am 18 years old, or older and I give my consent to the foregoing, on my own behalf

Signature _____ **Date** _____

Participation Fees:

I am paying by Check _____ CH # _____

I will pay on-line through the Trumbull Recreation Dept. _____