



Proudly Presents
'Disney's Lion King Jr.'

WHO? Students in 3rd through 12th grades. All students are guaranteed a role. Students should have an audition song prepared and be ready to read from a script and move!

WHAT? Students will receive instruction from working professionals in the areas of Vocal Music, Dance, Acting, Auditioning, and Performance while producing and performing the show.

WHEN? Rehearsals will start on Thursday, March 5th, from 6-8 pm. Rehearsals will be on Monday and Thursday evenings from 6-8 pm and Saturdays from 9 am - 12 pm. Auditions will take place during rehearsal on Saturday, March 7th. We will have added rehearsals as we get closer to the performances. A schedule will be given out at the first rehearsal.

Performances will be on the Friday, April 3, Saturday, April 4, 2020.

WHERE? Cornerstone Church Hendersonville Campus
1410 Stop Thirty Road Hendersonville, TN 37075

WHY? Students will gain confidence as individual performers and will collaborate with other performers of varying experience to create a truly unique performance experience taught by theatre professionals.

HOW MUCH? \$10 to register and a \$35 costume fee.

www.actorspointtheatre.com or call (615) 431-9620

Name: Parent/Guardian:

Age: Ethnicity: Performance Experience (years or specialty)

Phone: Parent Email:

Please fill out one form per camper and mail with payment to:
Actors Point Theatre Company 170D E. Main St. #236 Hendersonville, TN 37075



Dear Parents and Students,

We are so excited to announce our first student production during the year! Every single one of you is so important, and an integral part of our troupe.

We will be performing Disney's Lion King Jr. *Disney's The Lion King* has captivated the imagination of audiences around the world. The African savannah comes to life on *your* stage with Simba, Rafiki and an unforgettable cast of characters as they journey from Pride Rock to the jungle... and back again, in this inspiring, coming-of-age tale.

PLEASE READ CAREFULLY

Please come 15 minutes early on March 5th to confirm the proper forms are turned in and registration is complete. We will also have a sign in/out sheet. Campers under the age of 16 will need to be signed in and out by a parent or guardian at every rehearsal. This is for the security and safety of the student. No student under the age of 16 will be allowed to leave the building without being checked out by a parent or guardian approved by the parent in writing. No MINORS will be allowed to check out a child at anytime.

Please be prompt in picking up your camper. If you are running late, call one of the numbers we have provided.

Snacks: Students can bring snacks and drinks. All campers will be involved in working to keep the facility neat and tidy.

Dress: Students need to come in clothes they can move in: sweat pants, basketball shorts, and good tennis shoes. NO JEANS. Girls should wear something they are comfortable dancing in, leotard and tights if they have them. Girls should not wear clothing that is too short, tops that are too low, etc. Hair should be pulled back and out of the face. If the student has dance shoes, please bring those.

ABSOLUTELY NO FLIP FLOPS, SANDALS, or BARE FEET WILL BE ALLOWED ON THE STAGE OR IN REHEARSAL AREAS.

Costumes: Costuming will be taken care of by the costume department. Each student will be responsible for their own dance shoes, and any tights they might want/need.

Time off

We understand that each family has obligations during the week. Students may take off up to five days. More than that will be a detriment to your student and to the rest of the cast. UNDER NO circumstances can any student take off the week of March 30th – April 3rd. Tech/dress rehearsal week is the most critical week of the entire process. **If this week is an issue, it is best not to enroll in the production at all.**

Students who do take time off at any time during the first two weeks will need to be evaluated upon their return to make sure they can keep up with the material, performance level, and progress achieved during their absence. We don't want to set up any camper for failure or embarrassment if he/she doesn't have the ability or time to catch up due to absence.

Rehearsal

We will distribute scripts and email music tracks/links as soon as possible. Scripts/scores will need to be returned at the end of the rehearsal process. Only pencil may be used on any script/score and all script/scores must be returned fully erased. We suggest that you make a copy of the script/score so your student can write and make notes freely. A \$50 fee will be charged by the publisher for any original script that has been lost or not properly erased. Any such fees incurred are charged to the student/family.



Rehearsal at home

Homework/private rehearsal is THE main technique that separates amateurs from professionals. It is our belief that students need to endeavor to come prepared for rehearsal both mentally and emotionally. This rehearsal process is very fun and exciting but can also be demanding and strenuous. We will be teaching good attitudes and a good work ethic. There will be an expectation that once students go home everyday, they will rehearse everything they have learned previously so that they can come in ready the next rehearsal to learn new material. We will have time to **review**, but not to **re-teach**. We will provide YouTube videos of choreography as soon as students have learned it so that they can rehearse at home. We also suggest bringing a voice recorder/ipod/phone for learning parts, and a notebook for blocking and acting notes. The more the students use their voice and bodies the more they will retain in terms of the memory of lines, music and choreography. Line/music memorization and choreography is a language in and of itself. Your students will gain important life-skills as they master this performance language.

WE ARE ALWAYS AUDITIONING – EVEN DURING THE REHEARSAL PERIOD.

It should be noted that we will be evaluating the progress of each student regularly. If we notice that a student is not doing his or her homework or is not making an effort to improve in his or her responsibilities to themselves and the rest of the cast, that performer may be given a different role/responsibility. This policy is an endeavor to make sure that we don't set your student up for failure by giving them a role they are not willing to work for and that may result in a less than stellar performance experience as a result of an inadequate amount of effort on their part. In addition, we don't want to overwhelm students with more responsibility than they can handle. We realize that many of our students are involved in other activities outside of acting (dance classes, sports commitments, etc.) that may preclude them from performing at their best. **Rest** and a good night's sleep is highly encouraged during the rehearsal and performance process. Your student WILL BE STRETCHED both physically and emotionally during this period. Students will also find one of the most rewarding and fulfilling experiences in their lives by learning the value of really hard work and by developing strong positive relationships with others.

Lost and Found

Please make sure your student does not leave any of their personal items at Indian Lake Peninsula church. Both Indian Lake Peninsula Church and Actors Point Theatre Company or their personnel cannot be held responsible for lost items or items left behind from day to day.

Extra help during the run

Moms and Dads! We are looking for extra help during the performances in the areas of make-up, concessions, ticket sales, and ushering. You will not be expected to be behind the scenes every single performance, but your help will be greatly appreciated. There will be volunteer sign up sheets available at rehearsals.

Facebook Page

We will create a FB event page and "private" FB page that is only open to the participants. Please "add" us when you are invited to the private FB page and most importantly, please share the EVENT page with as many people as you possibly can through Facebook, e-mail, etc.

Location to be announced.

Please don't hesitate to email us or call us if you have any questions. 615-431-9620 or actorspointtc@gmail.com.

We look forward to working with you and having the best production yet!

Please send registration, releases and camp fee to:

Actors Point Theatre Company
170D E. Main St. #236
Hendersonville, TN 37075

Sincerely,

Greg Wilson – Producing Artistic Director



**Actors Point Theatre Company
Student Productions 2020**

**ACCIDENT WAIVER, RELEASE OF LIABILITY, MEDICAL CONSENT, PHOTOGRAPHY
RELEASE**

I HEREBY ASSUME ALL OF THE RISKS OF PARTICIPATING AND/OR VOLUNTEERING WITH ACTORS POINT THEATRE COMPANY (hereafter APTC) AND Cornerstone Church ACTIVITIES OR EVENTS, including by way of example and not limitation, any risks that may arise from negligence or carelessness on the part of the persons or entities being released, from dangerous or defective equipment or property owned, maintained, or controlled by them, or because of their possible liability without fault. I certify that I am physically fit, have sufficiently prepared for participation with APTC, activities or events, and have not been advised to not participate by a qualified medical professional. I certify that there are no health-related reasons or problems that preclude my participation with APTC. I acknowledge that APTC, Cornerstone Church and sponsors, and organizers of any activity or event in which I may participate will use this Accident Waiver and Release of Liability Form, and that it will govern my actions and responsibilities at said company, its property, activity or event. In consideration of my application and permitting me to participate in this at this company, activities or event, I hereby take action for myself, my executors, administrators, heirs, next of kin, successors, and assigns as follows: (A) I WAIVE, RELEASE, AND DISCHARGE from any and all liability, including but not limited to, liability arising from the negligence or fault of the entities or persons released, for my death, disability, personal injury, property damage, property theft, or actions of any kind which may hereafter occur to me including my traveling to and from the studio, activities and events, THE FOLLOWING ENTITIES OR PERSONS: APTC, Cornerstone Church and/or their directors, officers, employees, volunteers, representatives, and agents, the activity or event holders, activity or event sponsors, activity or event volunteers; (B) I INDEMNIFY, HOLD HARMLESS, AND PROMISE NOT TO SUE the entities or persons mentioned in this paragraph from any and all liabilities or claims made as a result of participation at this company, activities or events, whether caused by the negligence of release or otherwise. I acknowledge that APTC, Cornerstone Church and their directors, officers, volunteers, representatives, and agents are NOT responsible for the errors, omissions, acts, or failures to act of any party or entity conducting a specific event or activity on behalf of APTC and Cornerstone Church. I acknowledge that this APTC/Cornerstone Church activity or event may involve a test of a person's physical and mental limits and may carry with it the potential for death, serious injury, and property loss. The risks may include, but are not limited to, those caused by terrain, facilities, temperature, weather, condition of participants, equipment, vehicular traffic, actions of other people including, but not limited to, participants, volunteers, spectators, coaches, event officials, and event monitors, and/or producers of the event, and lack of hydration. These risks are not only inherent to participants, but are also present for volunteers, and all associated with the participant at the activity.

I give permission for any and all medical attention to be administered to my child in the event of accident, injury, sickness, etc. I also assume the responsibility for payment of such treatment. I understand that at this studio, events or related activities, I may be photographed. I agree to allow my photo, video, or film likeness to be used for any legitimate purpose by APTC the event holders, producers, sponsors, organizers, and assigns. I give full rights to APTC and its staff to use photos, video images and audio reproductions of me or my child to use for promotional or information purposes of APTC and Cornerstone Church or its agents. Photos may appear with or without names in press releases, websites, and other advertising materials.

PARENT / GUARDIAN WAIVER FOR MINORS (Under 18 years old)

The undersigned parent and natural guardian does hereby represent that he/she is, in fact, acting in such capacity, has consented to his/her child or ward's participation with Actors Point/Cornerstone Church its activities or events, and has agreed individually and on behalf of the child or ward, to the terms of the accident waiver and release of liability set forth above. The undersigned parent or guardian further agrees to save and hold harmless and indemnify each and all of the parties referred to above from all liability, loss, cost, claim, or damage whatsoever which may be imposed upon said parties because of any defect in or lack of such capacity to so act and release said parties on behalf of the minor and the parents or legal guardian.

Participant's Name (Printed)

Participant's Signature

Date

Parent or Guardian (Printed)

Parent/Guardian Signature

Date

BY SIGNING ABOVE, I CERTIFY THAT I HAVE READ THIS DOCUMENT AND I FULLY UNDERSTAND ITS CONTENT. I AM AWARE THAT THIS IS A RELEASE OF LIABILITY AND A CONTRACT AND I SIGN IT OF MY OWN FREE WILL.

Medical Release Form

APTC Kids Productions 2020

Parent/Guardian's Name: _____

Address: _____

Phone Numbers: Cell: _____
 Home: _____
 Work: _____
 Other: _____

Children's Names:	List of known medical conditions, including Food Allergies Drug Allergies. In addition, please include any and all over the counter and prescription drugs currently taking.
1	
2	
3	
4	

In an emergency, please contact: _____

Relationship to child/children: _____

Phone Numbers: Cell: _____
 Home: _____
 Office: _____

Physician's Name: _____
 Address: _____

Phone Number: Office: _____

Dentist's Name: _____
 Address: _____

Phone Number: Office: _____



Primary Insurance Company: _____

Billing Address: _____

Policy Holder's Name: _____

Address: _____

Relationship to child/children: _____

ID#: _____

Phone Number: _____

Secondary Insurance Company: _____

Billing Address: _____

Policy Holder's Name: _____

Address: _____

Relationship to child/children: _____

ID#: _____

Phone Number: _____

Statement of Consent:

In the event of an emergency or non-emergency situation requiring medical treatment, I, _____
_____, hereby grant permission for any and all medical and/or dental attention to
be administered to my child/children, in the event of an accidental injury or illness, until such time as I can be con-
tacted. This permission includes, but is not limited to, the administration of first aid, the use of an ambulance, and
the administration of anesthesia and/or surgery, under the recommendation of qualified medical personnel.

Signature: _____ **Date:** _____