

CHILDREN'S THEATER WORKSHOP – Summer 2025

Information Needed for Various Grants that Help Fund Children's Theater Workshop Programs

Child's Name: _____ Age: _____ Date of Birth: _____

Does the child *live locally* or is the *child visiting*? (circle one)

Child's Gender (circle one): *Male Female Other* ___ Prefer not to answer

Child's Race (circle one): *White Black/African American Asian American Indian/Alaskan Native
Native Hawaiian or other Pacific Islander Bi-Racial (two or more races) Prefer not to answer*

Child's Ethnicity (circle one): *Hispanic Non-Hispanic* ___ Prefer not to answer

Child's Primary Language (if other than English): _____

Health Information and Permission

Please list any individual health, dietary or allergy issues your child may have: _____

Please list any medications that medical staff may need to know should there be an emergency with your child:

In the event of a medical emergency, the staff of the Children's Theater Workshop has my permission to make any health-related decisions, administer any emergency medical care and act on my behalf for the welfare of my child in my absence.

Signature of Parent/Guardian: _____ Date: _____

Printed Name of Parent/Guardian: _____

Emergency Phone Number: _____

Image Release Permission

The Staff of the Children's Theater Summer Workshop has my permission to take and release pictures or images of my child. Images may be released to sources such as local newspapers, Town Dock, social media, and Children's Theater Workshop brochures and advertising products.

Signature of Parent/Guardian _____ Date: _____

(Continued on reverse side)

Behavior Contract

As a participant in the Summer Children's Theater Workshop:

- I will attend the full two weeks (10 days).
- I will not wear flip flops.
- I will follow teacher/Board Member directions.
- I will participate in group activities.
- I will keep my hands to myself and avoid play-fighting or pranks.
- I will not interfere with the activities of other students.
- I will not bully or harass others with my words, my actions, or via text or social media. This may include inappropriate language, gossip, threats, teasing, exclusion, and non-verbal looks or actions.
- I will place my cell phone in the designated storage area upon arriving at the Summer Theater Workshop and leave it there until dismissal.
- I will not engage in any language or behaviors that may make others feel uncomfortable or unsafe.
- I will notify my parent(s)/guardian(s) of any inappropriate communication from other CTW participants or CTW staff members.
- I will talk with a CTW staff member or my parent(s)/guardian(s) if I feel uncomfortable or unsafe or if I think another participant may feel uncomfortable or unsafe.

Not following the CTW Behavior Contract may result in any of the following consequences:

- Behavior Contract reminder
- Time out
- Call to parent/guardian
- Sent home for one day
- Removal from CTW summer workshop

Student: My signature below indicates that I have read, I understand; and, I agree to the Behavior Contract.

Student Signature: _____

Parent/Guardian: My signature below indicates that I have read and I understand the Behavior Contract. Furthermore, my signature indicates that I have discussed the Behavior Contract with my child so that he/she may understand behaviors that will promote success and fun for all children in the Children's Theater Summer Workshop.

Parent/Guardian Signature: _____ Date: _____

Please return the completed/signed pages with the tuition (if not already paid or scholarship) and biography to: CTW Registration, PO Box 493 Oriental NC 28571

Biography for Summer Theater Workshop 2025

This information is used in the program for the final sharing program; tell us about yourself in as much detail as you can.

My name is _____ Most people call me

I am _____ years old and just completed the _____ grade at

_____ (school attended)

I like to

_____ and

I LOVE to _____.

I have / have not (circle one) attended the Summer Theater Workshop in the past. If you have, for how many years _____.

I have been in _____

(any other plays, pageants, skits, etc)

as _____

(the role you played or how you helped)

I am proud to say that I have received

_____ (other awards from schools, clubs, church or community)

I would like to thank . . . (can be family, friends, teachers, etc)
