

ACTOR'S CONTRACT

Please complete the Contract, Rehearsal Conflict and the Volunteer information requested below. Please write legibly. Sign the form at the bottom and return this form with the \$25 strike deposit (checks made out to Seton School) to the production staff or in the front office on or before February 11, 2012.

Contact Information

	Actor	Mother	Father
Name			
Grade		Not applicable	Not applicable
Home Phone			
Cell Phone			
Work Phone			
Home Email			
Work Email	Not applicable		

(If info is same, enter it once and write "same" in other blocks)

Rehearsal Conflicts: (Please list all know conflicts, dates and activities.)

Volunteers (Parents): Please circle the area(s) where you are able to help.

Choreography	Costumes	Hair/Makeup
Props	T-Shirts	Promotional
Refreshments	Dress Rehearsal Meal	Ticket Sales
Photography/Video	Admissions/Usher	Musician
Technical Sound	Technical Lights	Technical Crew
Set Design	Set Construction	Set Painting
Chaperoning	Other	

I/we have read this Actor's Contract and understand and agree to its terms.

Parent's Signature	Date
Actor's Signature	Date