

# GULFPORT LITTLE THEATRE – FALL THEATRE CLASSES

**Gulfport Little Theatre – August to October 2017**

Name \_\_\_\_\_ M \_\_\_\_\_ F \_\_\_\_\_ Age \_\_\_\_\_

Parent/Guardian's Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_ (Work) \_\_\_\_\_

Email \_\_\_\_\_

Emergency contact name, relationship, and phone number:

\_\_\_\_\_

List any medical conditions or allergies (if none, please note):

\_\_\_\_\_

Please list any previous theatrical experience, including classes or performances on the back of this sheet

## COMPLETE THE FOLLOWING AND SUBMIT WITH A CHECK MADE PAYABLE TO GULFPORT LITTLE THEATRE

1. Check Class attending:
- |  |                     |
|--|---------------------|
| ___ Stage I Acting & Musical Theatre (ages 6-11)<br>Begins Monday, August 21 5-6pm at GLT  | \$150 per trimester |
| ___ Stage 2 Acting & Musical Theatre (ages 12-19)<br>Begins Tue Aug 22 5-6:15pm at GLT     | \$195 per trimester |
| ___ Homeschool Acting & Musical Theatre (ages 6-19)<br>Begins Tue, Aug 24 1:00-2:15 at GLT | \$195 per trimester |
| ___ Individual Acting Instruction* – call for availability<br>*Open to all ages            | \$50 per hour       |

*I, as the parent/guardian, agree to be responsible for any or all damages caused by my child during the course of this event, and I hereby give permission for my child to attend Gulfport Little Theatre's Fall Acting Classes and to participate in any and all events scheduled. I also agree to hold harmless and release from liability Gulfport Little Theatre, its Board(s), class instructor(s), counselors, and volunteers for any accident, illness, or injury that may occur as a result of any event related to Gulfport Little Theatre's Fall Theatre Arts Program. I understand that I am responsible for picking up my child promptly after class and additional charges may be incurred for late pickup.*

\_\_\_\_\_  
Signature of Parent/Guardian (Date)

\_\_\_\_\_  
Printed Name – Parent/Guardian

Please mail completed registration forms and payment to Cal Walters 421 Commerce St, Gulfport, MS 39507.

Questions? Call Cal Walters at 251-689-7167 or email [glttap@outlook.com](mailto:glttap@outlook.com)