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*As You Wish: An Inconceivable Tale of Adventure, Romance and Villainy* Cast Details Form

|  |  |
| --- | --- |
| Name: |  |
| Preferred Name/Pronouns: |  |
| Date of Birth: |  |
| Parent/Guardian Names: |  |
| Contact Number: |  |
| Contact Email: |  |
| The performance of *As You Wish: An Inconceivable Tale of Adventure, Romance and Villainy* will take place on Saturday 20th July 2024 at the Barnfield Theatre. I know that my young person can be available for this date. | Yes/No |
| Rehearsals for *As You Wish: An Inconceivable Tale of Adventure, Romance and Villainy* will run from Saturday 13th April to Saturday 20th July.  Please state any dates you are unable to make in the attached rehearsal schedule at the end of the form. | |

Rehearsals will be held **1-3pm** at **Exeter Community Centre, St Davids Hill, EX4 3RG**. The final performance will be held at the **Barnfield Theatre**, Exeter on **Saturday 20th July**. Cast are required to be available for the entire day of the performance to allow for a technical rehearsal in the morning.

The total cost to be involved in the project is £135. If you have more than one child attending and would like to spread out the costs further, please speak to Jake ([jake.anthos-arts@outlook.com](mailto:jake.anthos-arts@outlook.com)).

|  |  |
| --- | --- |
| I agree to a payment of £135 for the full project.  Payment via BACS to:  *Anthos Arts*  *Account Number: 57329370*  *Sort Code: 600806*  Please note, full payment must be made by Saturday 25th May.  **PLEASE USE CHILD’S NAME AS A REFERENCE ON ANY PAYMENT.** |  |

**Permissions and Emergency Contacts:**

As part of our safeguarding policy, Anthos Arts asks that parents of children and young people who attend our sessions have three emergency contacts whom we can contact in the event of an emergency. Participants under the age of 16 also require permission to leave rehearsals without being accompanied by an adult. Please fill out the section below.

I am happy for my child to leave rehearsals without being accompanied by a nominated adult:

YES/NO (please circle/delete as appropriate.)

I ……………………………….. hereby give my consent for the following individuals to collect my child/children on my behalf from sessions and events in my absence.

Signature: Date:

Name of Nominated Person #1:

Contact Number:

Relation to Child:

Name of Nominated Person #2:

Contact Number:

Relation to Child:

Name of Nominated Person #3:

Contact Number:

Relation to Child:

Parents/Carers/Guardians are at liberty to disclose the names of anyone who they know are NOT allowed to collect children on their behalf. Anthos Arts are committed to supporting safeguarding and the safety of children and so please let us know if you wish to name any such persons.

**Known Medical Information:**

(Please list all known medical information in regard to your child/children attending the sessions*. Our primary first aider during sessions is Jake Celecia*.)

CONSENT:

I ………………………….. hereby consent to any First Aid or medical treatment necessary to be given to my child/children ………………………………………………………………………………………………… during rehearsals.

**Media and Publicity**

A part of Anthos Arts’ new success has been our media attention. Please sign below to show that you are happy for us to photograph/video your child and that your child is allowed to be a part of any media used within our publicity.

|  |  |
| --- | --- |
| I (parents/ guardians name)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  allow my child ­­­­­­­­­­­­­­­­(child’s name)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  to be photographed and videoed for use by Anthos Arts publicity. | Parent/ guardians signature |

Signed: Dated:

If there are any questions, then don’t hesitate to get in touch! Contact us with any queries you might have. Otherwise please return this completed form to [applications.anthos-arts@outlook.com](mailto:applications.anthos-arts@outlook.com).

Thank you for completing this form. We look forward to working with you.

*The Anthos Team.*

SUMMER TERM REHEARSALS- APRIL TO JULY

*Please state any dates you are unable to make.*

|  |  |
| --- | --- |
| Saturday 13th April 1-3pm |  |
| Saturday 20th April 1-3pm |  |
| Saturday 27th April 1-3pm |  |
| Saturday 4th May 1-3pm |  |
| Saturday 11th May 1-3pm |  |
| Saturday 18th May 1-3pm |  |
| Saturday 25th May- 1-3pm |  |
| Saturday 1st June 1-3pm |  |
| Sunday 8th June 1-3pm |  |
| Saturday 15th June 1-3pm |  |
| Saturday 22nd June 1-3pm |  |
| Saturday 29th June- 1-4pm |  |
| Saturday 6th July 12-4pm |  |
| Saturday 13th July 11-3pm **DRESS REHEARSAL** |  |
| Saturday 20th July 11am-8pm **SHOW DAY** |  |