

# STUDENT INFORMATION SHEET

Name: \_\_\_\_\_ Grade: \_\_\_\_\_

Acting Experience:

Musical Experience:

Dance Experience:

Known rehearsal conflicts that occur regularly (practices, lessons...)

*(Unexpected events aside...it is our expectation that students be at rehearsal when needed. Calendars will be provided. Please note all regular conflicts and understand that it could affect casting decisions.)*

By signing below, I agree to:

1. Attend all rehearsals and performances (please check dates!)
2. Abide by all rules and consequences
3. Work hard and represent DHS in a positive manner
4. HAVE FUN!

*Student signature:* \_\_\_\_\_

By signing below, I agree to:

1. Make sure my student is in attendance
2. Help my student with costume and lines
3. Uphold rules and consequences

*Parent signature:* \_\_\_\_\_