

2012 State Thespian Conference Registration

Student Name: _____ Parent Name: _____
Address: _____ Phone Number: _____
City: _____ Zip: _____ Cell Number: _____
Student E-mail Address: _____ Parent E-Mail: _____

Payment Guidelines

1. The estimated expense of this trip is predicated on the availability of a sufficient amount of parent driver/chaperones. The number of travelers may be limited by the number of available seats and will therefore be assigned on a first-come, first served basis.
2. A non-refundable deposit payment of a \$35.00 deposit holds your place on the trip.
3. Deposit payments will be accepted until Wednesday, November 23, 2011.
 - a. Deposit is non-refundable after Wednesday, November 23, 2011.
 - b. Payment schedule is included in this contract.
4. Late payments will be subject to a late fee of \$10.00 .
5. Complete payment MUST be made by Thursday, January 26, 2012.
6. Substitutions, arranged by the canceling party, may be arranged up to but no later than February 16, 2012. A change fee of \$10.00 will apply. A t-shirt order will NOT transfer to the new student.
7. All other cancellations will be subject to a cancellation fee calculated on a graduated scale.
8. Funds earned via Thespian Fundraisers may be applied in total or in part to expenses related to this contract.
9. A complete payment may be made at any time.

Payment Schedule

Deposit (\$35.00) Due: Wednesday, November 23, 2011
Payment (\$90.00) Due: Thursday, January 26, 2012 (plus any overages noted below)

Additional Fees

- _____ Please order a conference t-shirt for my student. (Additional expense of \$10.00)
Please indicate size: S M L XL XXL (at \$12.00)
- _____ Please enroll my student for the Individual Event Competition. (Additional expense of \$5.00)
Please indicate IE category: _____
- _____ Please enroll my student in the Tech Olympics Competition (Additional expense of \$5.00)
- _____ Please consider my student as an SSO Candidate. (Additional expense of \$5.00)
- _____ Please register my *Junior* student for the College/University Auditions. (Additional expense of \$5.00)
Please note: this activity requires the prior completion of the related workshop at Troupe Development Day or Area Thespian Conference. This activity is available only to Junior-level students.

Agreement

I, the undersigned, have read, understand and agree to the above stated guidelines and payment schedule. My son or daughter is also aware and agrees to the guidelines presented here. I have read the fact sheet for the State Thespian Conference and fully understand the financial obligations undertaken in this agreement.

(student signature/date)

(parent signature/date)

Payment Summary

TO BE COMPLETED BY THEATRE DIRECTOR

	Date	Amount	late fee	check number
Deposit Made: (\$35.00)	_____	_____	_____	_____
Final Payment: (\$90.00)	_____	_____	_____	_____