



LHS TRIP TO MI THESPIAN FESTIVAL

Completed Packet and Money due: Thursday, October 24th to Ms. Miller
(you can also turn in until Nov. 2nd but add \$20 for late registration fee)

We are in need of driving chaperones for this trip!!

Responsibilities and perks:

- drive students from LHS to Cobo Friday, Dec. 13th @ 6:45 am & home Saturday night
- Only pay registration \$75 (hotel, complete festival participation, festival t-shirt included)
- drive back Saturday night ~10:30pm

Contact me through email asap, if willing

Quantity of drivers needed will depend on quantity of students going (4+ in a car, please)

COST for Students:

CTE Theatre Class Student: No Cost

Inducted Thespian : \$140 (annual ITS induction in spring at banquet)

Theatre Student: \$150 (non-inducted student)

COMPETING in an IE?? Make sure to check with Ms. Miller ASAP. Only 2 competitors per category!
Be ready to perform/present to Ms. Miller.

AUDITIONING FOR COLLEGE SCHOLARSHIPS? You have extra work and deadlines! It's all up to you (Ms. Miller can't submit) so CHECK RULES

Please make checks payable to: LHS Theatre

Partial refunds available until Nov. 2nd. No refunds after Nov. 2nd.

2019 Michigan Theatre Festival

STUDENT LEGAL INFORMATION:

Student Name:

Grade: Address:

Guardian 1:

Phone:

Guardian 2:

Phone:

Parent Email:

EMERGENCY INFORMATION:

As the legal parent/guardian of _____, I give him/her permission to travel to the Michigan Thespian Festival with LHS Theatre Department. I understand and agree to the behavior expectations and I understand that my child will be sent home at my expense if s/he violates the rules.

In case of accident or serious illness, I hereby authorize school personnel to take my child (or have my child transported) to **an area hospital**. (Please note any medication or allergies and list any health insurance information – name and group coverage numbers.)

Parent/Guardian Signature

EMERGENCY CONTACTS (other than Parent/Guardians listed above)

Emergency Contact 1:

Emergency Contact 1 Phone:

Emergency Contact 2:

Emergency Contact 2 Phone:

Insurance Provider:

Group Coverage Number:

Do you give us permission to administer minor first-aid (bandages, cold packs, etc): Y N

Allergies:

Special Physical Considerations:

Medical Conditions that may come up during the trip:

Medications that must be administered during the trip must be dropped off in the **ORIGINAL** prescription/product container with the child's name clearly stated. Please include only the dosage needed for a single day. Medication must be dropped off and signed in with a chaperone before the trip departure on Friday, December 2, 2016 and picked up from a chaperone during pick-up on the morning of Sunday, December 4, 2016. Medication will be administered according to the directions you provide below. Signing this form authorizes HVS staff (adult only) to administer the medication per your specifications.

Medication Instructions:

Special dietary considerations:

HVS STUDENT EXCURSION TRAVEL RELEASE AND ACKNOWLEDGEMENT OF CANCELLATION POTENTIAL:

Name of student: _____

Name of parent(s) or legal guardian(s): _____

Name of School: Lakeland High School

Name of excursion travel: Michigan Theatre Festival

Dates of excursion travel: December 13-14, 2019

The undersigned parent or legal guardian, **acknowledging the inherent risk of excursion travel**, on behalf of the above student, does hereby release and agree to defend, indemnify, and hold harmless Huron Valley Schools, its Board of Education, and Huron Valley Schools' past, present, and future board members, administrators, teachers, employees, volunteers, agents, and chaperones from any and all claims, demands, liabilities, and causes of actions related to the above excursion travel, including, but not limited to, claims related to damages or injury to persons or property sustained on said travel, or related to cancellation of said travel, whether based on intentional, negligent, or innocent acts or omissions. The undersigned recognizes and accepts the inherent risk of excursion travel, whether related to the dangerous nature of travel itself, the sites traveled through and visited, or the actions and inactions of others encountered during the travel or accompanying the student on the travel, and accepts this risk of harm. The undersigned also acknowledges and agrees that the Superintendent of Huron Valley Schools and/or its Board of Education reserves the right to cancel the excursion travel at any time if, in the Superintendent's or the Board of Education's discretion and judgment, the trip is no longer advisable due to safety, educational, or any other concerns. *If at any time, the excursion travel is cancelled by the Superintendent and/or the Board of Education, the parent assumes the risk of any possible financial liabilities due to cancellation.*

Parent/Guardian Signature

Date

Parent /Guardian Signature

Date

Behavior Expectations and Consequences:

While the chaperones cannot be held responsible for the actions of your son or daughter, we will do our best to enforce the trip rules as stated in this packet.

Minor violations of these trip rules will result in the loss of some privileges associated with the trip. Major violations, such as the use of drugs alcohol, XXX rated behavior or refusal to cooperate with any chaperone, will result in your son/daughter being sent home at your expense. **THIS INCLUDES POSSESSION/USE OF VAPES OR TOBACCO.**

Please be aware that at the minimum this driving to Festival to pick up your student. You will be responsible for coming to get your child, should it be necessary that your child is sent home prior to the end of the trip.

I HAVE READ THIS ENTIRE RULES AND AUTHORIZATION PACKET AND AGREE TO ABIDE BY ALL TRIP RULES & REGULATIONS AS STATED IN THIS PACKET.

Student Signature _____ Date _____

Parent Signature _____ Date _____

REQUIRED FESTIVAL INFORMATION

Student T-Shirt Size: _____ (included in festival cost. Adult, regular short sleeve tshirts)

Chaperone T-Shirt Size: _____ (included if you're willing to chaperone and drive. ☺)

****HOTEL ROOM SIGN UP TBA****

EVENT COMPETITIONS (optional):

Circle the Event or 2 Events you want to compete in (you don't have to compete in order to attend festival):

Auditions may be necessary, as we can only submit 2 per event.

Rules can be found on michiganthespians.com – MAKE SURE TO CHECK RULES!!!!!!!

ACTING	MUSICAL	DANCE	PRODUCTION		
Monologue	Solo	Solo	Playwriting	Costume Design	Lighting Design
Duet Scene	Duet	Duet	Film	Make-up	Sound Design
Group (5+)	Group (5+)	Group (5+)	Marketing	Scenic Design	Stage Management

Indicate partners for each duet or group performance: _____

What APPROVED (check the list on the official festival page) scene/song/show are you

presenting: _____

SENIORS ONLY:

College Scholarships: Seniors may auditions for scholarships in the following areas: Musical Theatre Performance, Acting Performance, Design/Tech, or Stage Management. All paperwork will be filed on **GetAcceptd.com**. There is no limit to the number of seniors from each school that present for scholarships. **YOU MUST DO THIS** (Miller can't). **BE SURE TO MAKE THE DEADLINE & HAVE PROPER ITEMS.** You **NEED** your ITS membership number – it's on the card you received at banquet. If you can't find, ask Miller **AHEAD OF TIME**.

Thespian Scholarships: Please indicate if you want to audition to apply for the Thespian Scholarship. Each school may only send two representatives to the Thespian Scholarship competition. This is a \$500 Scholarship to any school and is highly prestigious!

Thespian Scholarship (\$10 fee): _____ College Scholarship (\$25 fee): _____

Event Category (Music Theatre, Acting, Lighting, etc.) _____