



BTE Theatre School Registration Form

Winter 2010

Send payment and registration to:

BTE Theatre School
226 Center Street
Bloomsburg, PA 17815

The balance is due on the first day of class. You may send full payment now. Tuition will be refunded if the class is canceled. No refunds will be given after the first day of class, but credit may be given which can be applied toward another class.

\$2.50 charge applied for Credit Card payment
Student's Name:

Student's Current Grade:

Student's Date of Birth:

Address (including City, State, Zip):

Parent/Guardian Name:

Home Phone:

Work Phone:

Cell Phone:

Email Address:

Amount Enclosed:

SUNDAY NIGHT LECTURE SERIES

Join the discussion series with local scholars and ensemble members in the relaxed setting of a neighborhood café.

Sunday, February 21, 6:00 PM
Examine *Hamlet* from a theological perspective, Guest lecturer, Anne Evans.

Sunday, February 28, 6:00 PM
Master class with Quinn Collins
The evening discussion offers insight into composer, Quinn Collins, approach to creating the score for *Hamlet*.

Sunday, March 7, 6:00PM
Examine the psychology and social context of the play, guest lecturer, TBA.

Sunday, March 14, 6:00PM
Master class with Gerard Stropnický
This evening discussion offers insight into director Gerard Stropnický's approach to Shakespeare's *Hamlet*.

Cost: \$8.00 per lecture, paid in advance

Location: Kristy's Pub

Refreshments & gratuity are the responsibility of the participant.

**BLOOMSBURG THEATRE ENSEMBLE
THEATRE SCHOOL RELEASE**

I, _____, in consideration of being accepted into the Theatre School of the Bloomsburg Theatre Ensemble and intending to be legally bound hereby for myself, my heirs, executors, administrators, and assigns, do hereby waive and release any and all rights and claims which I individually, jointly, or severally, may have against the Bloomsburg Theatre Ensemble, its agents, representatives, successors and assigns for any and all injuries which may be suffered during participation in the Bloomsburg Theatre Ensemble Theatre School.

I grant permission to Bloomsburg Theatre Ensemble, its employees and agents, to take and use visual/audio images of me. Visual / audio images are any type of recording, including photographs, digital images, video recordings, audio clips or accompanying written descriptions. BTE will not materially alter the original images. The images may be used in any manner or media without notifying me, such as the BTE web site, publications, promotions, advertisements, and posters. I waive any right to inspect or approve the finished images or any printed or electronic matter that may be used with them. I release BTE and its employees and agents, including any firm authorized to publish and/ or distribute a finished product containing the images, from any claims, damages or liability which I may ever have in connection with the taking of use of the images or printed material used with the images.

Dated: _____

Student Name

Student Signature

Address

Phone

HEALTH HISTORY AND EMERGENCY INFORMATION SHEET

Name _____ Birth date _____ Age _____ Sex _____

Parent/Guardian or Spouse _____

Home Address _____ Phone _____

Emergency Contact Person _____

Home Address _____ Phone _____

In case of injury which hospital do you prefer transport to:

(circle one)

Geisinger Medical Center

Evangelical Community Hospital

Berwick Hospital

Bloomsburg Hospital

Operations or serious injuries (dates) _____

Disability or chronic recurring illness _____

Dietary Modifications _____

Current Medications _____

Other information in case of an emergency _____

Name of family physician _____ Phone _____

Are all immunizations up to date? Yes _____ No _____

Date of last Tetanus Shot _____

Health History

_____ Heart defect/disease

_____ Seizures

_____ Diabetes

_____ Bleeding/Clotting disorders

_____ Hypertension

_____ Other (Specify)

Allergies

_____ Hay Fever

_____ Food (Specify)

_____ Insect Stings

_____ Penicillin

_____ Other Drugs

_____ Environmental

_____ Other (Specify)

We want to make this educational BTE experience as fun and as enriching as possible. With this in mind, if you have any emotional or developmental concerns that you would like to share, please email the instructor directly, prior to class beginning. Your instructor's email can be found on our website at

www.bte.org. If you would prefer to speak in person, please email the instructor to set up a time. Thank you.

THIS INFORMATION WILL BE KEPT CONFIDENTIAL.