

Student name: _____ Act Name: _____

Red Hill Variety Show: Participant Contract

(Please fill out one per participating student)

****BOTH PARENT/GUARDIAN AND STUDENT
MUST INITIAL NEXT TO EACH STATEMENT BELOW.****

_____ I HAVE THOROUGHLY READ THE RULES AND GUIDELINES FOR PARTICIPATING
IN THE 2024 VARIETY SHOW FOUND AT WWW.REDHILLPTA.ORG/VARIETY-SHOW.

_____ I AGREE TO THE AUDITION GUIDELINES.

_____ I AGREE TO THE REHEARSAL SCHEDULE AND PERFORMANCE DATES AND
AGREE TO UPHOLD THE EXPECTATIONS FOUND IN THE RULES AND GUIDELINES. I
UNDERSTAND THAT MY ABSENCE MAY RESULT IN BEING CUT FROM SHOW LINE UP

_____ I UNDERSTAND THE LEVEL OF COMMITMENT REQUIRED TO PARTICIPATE IN
THE VARIETY SHOW AS WELL AS THE EXPECTATION FOR PARENTAL SUPPORT AND
INVOLVEMENT

PHOTO/VIDEO RELEASE

Yes _____ No _____ I give permission to the Red Hill PTA to photograph my son/daughter for
rehearsal and production pictures which may be used for the website, social media, cast picture,
and performance DVD.

Act's Lead Parent Name (Please Print)

Parent Cell Phone Parent Email (Please Print)

Student Signature Date

Parent/Guardian Signature Date