



2019 CAST Winter Production
for actors ages 16+



Check or Credit Card Payments:
MAIL registration form w/payment to:
ThinkBIG! Theater Arts, Inc.
Attn: Heather Thorgersen
42 South Ocean Avenue
Patchogue, NY 11772
Or email: Heather@thinkbigtheaterarts.org
Please make check payable to:
ThinkBIG! Theater Arts, Inc.

CAST Member's Name: _____ Age: _____

Best way to contact you:

Phone _____ Email: _____

Parent/Guardian/Support Staff who will be accompanying you (if applicable):

Name: _____

Best Phone Number: _____

CAST Member Allergies, health concerns, etc. Anything we should know to help make your experience the most successful:

REHEARSALS: Mondays, from 5:30pm - 7pm starting March 4th
PERFORMANCES: Friday, May 31st @ 7pm
Saturday, June 1st @ 2PM

LIABILITY AND PHOTO RELEASE

- I hold ThinkBIG! Theater Arts, Inc. harmless against all claims or demands arising from my/ my child(ren)'s participation in workshops.
I hereby give ThinkBIG! Theater Arts, Inc. permission for emergency medical treatment, in the event that my guardians cannot be reached in a timely manner.
ThinkBIG! Theater Arts, Inc. is not responsible for lost or stolen items.
All photographs and video resulting from participation in theater projects and programs will become the property of ThinkBIG! Theater Arts, Inc. to be used in promotion on website, newsletters, social media, and promotional materials. For confidentiality, no names will be associated with photos/videos.
I understand that there is a tuition due in the amount of \$225/\$200 for my participation in this program and that I can speak with Heather or Courtney if there are any concerns or if I require financial assistance for my participation.

Payment Info: NEW CAST MEMBER: \$225.00
RETURNING CAST MEMBER: \$200.00
Would you like us to Direct Bill for this program? _____
AMOUNT DUE:\$ _____
Check Enclosed Check # _____
[VISA] [MC] [AMEX]
Credit Card # _____
Exp Date _____ CVV (on back) _____
Name as it appears on card _____
Upon receipt of registration form and tuition we will send a confirmation email as well as receipt for your records .

Signature of CAST MEMBER /Parent/Guardian

Date