

**SADDLE RIVER YOUTH THEATRE - REGISTRATION FORM 2020-2021**  
**SRYT.INFO    BOX OFFICE: 201-825-8805    EMAIL: srytheatre@aol.com**

**PROGRAM NAME:** \_\_\_\_\_

**TODAY'S DATE:** \_\_\_\_\_

**PARENTS' NAMES:** \_\_\_\_\_

**STUDENT'S NAME:** \_\_\_\_\_

**STUDENT'S AGE AND GRADE:** \_\_\_\_\_

**COMPLETE MAILING ADDRESS WITH ZIP CODE:** \_\_\_\_\_  
\_\_\_\_\_

**HOME PHONE & CELLPHONE:** \_\_\_\_\_

**EMERGENCY CONTACT NAME AND PHONE NUMBER:** \_\_\_\_\_

**PARENT'S EMAIL (Mandatory):** \_\_\_\_\_

I will allow my child's picture to be used in SRYT, Inc. marketing: \_\_\_\_\_ (Yes or No)

**MEDICAL RELEASE:** "I hereby give permission to SRYT to proceed with emergency treatment for my child in the event of accidental injury or illness in the event the family or the emergency contacts cannot be reached."

**PARENT OR GUARDIAN INITIAL HERE** \_\_\_\_\_.

**GENERAL INFORMATION:**

Where did you hear about our program? \_\_\_\_\_

Has your child had past experience with other theater or dance schools?  
( If Yes, please list): \_\_\_\_\_

Do you allow your child to take Children's Tylenol?  
\_\_\_\_\_

**THE FOLLOWING INFORMATION WILL BE KEPT CONFIDENTIAL AND HELPS SRYT TO UNDERSTAND, AND WORK WITH PARENTS TO MEET, THE NEEDS OF THE INDIVIDUAL CHILD.**

Does your child have any medical conditions we should be aware of? \_\_\_\_\_

Does your child have emotional, learning or physical issues that we should be aware of?  
\_\_\_\_\_

Are there any domestic or social issues we should be aware of? (divorce, death in family, bullying)  
\_\_\_\_\_

**SCHEDULING CONFLICTS:** \_\_\_\_\_  
LIST ONLY REHEARSAL ABSENCES.

**SRYT GUIDELINES AGREEMENT:** Auditions are for character placement only--every student gets a part. Your child will be asked to sign a Student Contract that states they will accept any part from the list of guaranteed parts on their contract. They will also agree to learning their lines, songs and dance steps by the due dates given out by the Directors. (There is no refund of tuition after this audition. Please explain this to your child before they proceed with the audition. There are no refunds for catastrophic events such as Covid-19. In the event of quarantine, all programs will resume on Zoom.)

**I have thoroughly read the SRYT GUIDELINES for 2020-2021 and agree to the Rules and Regulations mentioned therein as terms of my child's acceptance in the program. I understand that SRYT is not responsible for any injury that may result from my child attending an SRYT rehearsal or show. I understand that there is no refund of tuition after the audition date. I agree to these GUIDELINES and TERMS by signing and dating below:**

**Parent/Guardian Signature:** \_\_\_\_\_ **Date:** \_\_\_/\_\_\_/\_\_\_