

## PERFORMER CONTRACT

## **"THE SOUND OF MUSIC"**

PERFORMER & PARENT: Please complete this form, making sure to check every box. Both Actor & Parent must sign. A copy of this contract will be returned to you for your records.

## Auditionee Name:

Email:

Cell Phone:

Statement of Commitment, Excellence and Commitment to Excellence	
I voluntarily submit this "Performer Contract" as a bid to be cast in the production of "THE SOUND OF MUSIC".	
I submit and commit to the goals, values, standards and guidelines set forth by	
<ul> <li>STPCSTheatre, its producers, directors, s</li> <li><u>I have read</u> and I understood the "Parent of OF MUSIC" 2020" document.</li> </ul>	taff and crew. & Performer Information Packet <b>"THE SOUND</b>
I will enthusiastically accept and embrace	any and all roles that I am given by the directors. professional attitude and work ethic during the
I will adopt a "Mutual Respect and Commentation of the second	
	ir; tattoo, pierce and/or alter my body, until after
I will allow STPCSTheatre Troupe to cut, t	
<ul> <li>discretion, or I will provide an appropriate wig.</li> <li>I hereby authorize and consent that STPCSTheatre Troupe shall have the absolute right to copyright, publish, use, sell or assign any and all photographs, portraits or pictures, videotapes and/or sound recordings, or any part thereof, that have been taken of the student and/or cast member, or in which the student and/or cast member may be included in whole entry part.</li> </ul>	
in whole or in part. <ul> <li><u>I understand</u> the theatrical chain of command and will respect it.</li> </ul>	
I will study, learn, and memorize ALL lines, lyrics, choreography, blocking and staging assigned to me.	
Livill attend rehearsals and performances on time as scheduled on the Theatrix Calendar	
	deavor to resolve all conflicts with fellow cast understand that it is a positive & healthy life s any offense in a timely manner. (Matthew
Signature of Performer:	Date:
Signature of Parent/Guardian:	Date: