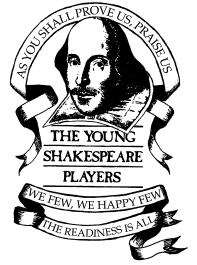


# Spring/Summer 2012

## The Young Shakespeare Players Registration Form

(Fill out a separate form for each actor in the family.)



Actor's Name \_\_\_\_\_ Birth Date \_\_\_\_\_ Grade & School \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Parents/Guardians \_\_\_\_\_ Phone (h) \_\_\_\_\_ (w) \_\_\_\_\_

Parent E-mail address(es) that is checked regularly \_\_\_\_\_ T-shirt size (adult) \_\_\_\_\_

Actor's E-mail address(es) that is checked regularly \_\_\_\_\_

Last YSP Production \_\_\_\_\_

[For details, please see attached materials, or email [ysp@ysp.org](mailto:ysp@ysp.org), phone 608-258-0015, or visit [www.ysp.org](http://www.ysp.org).]

**Spring One-On-One Shakespeare Workshop** [intro 3/20; ends 5/20]

**Shaw's Caesar & Cleopatra** (for adults & youth) [intro 3/29; ends 6/24]

**The Shakespeare Circle Adult Project**  
*Measure for Measure* [intro 4/16; ends 11/11]

**King Lear**  
*Early summer play* [intro 5/14 & 5/19; ends 7/29]

**As You Like It**  
*Late summer play* [intro 6/11 & 6/16 ends 8/26]

**Twelfth Night**  
*New production for Fall* [intro 9/8 & 9; ends 12/9]

**YSP Brief, Focused Workshop**  
(for adults & youth)

[Topic: \_\_\_\_\_]

[starts \_\_\_\_\_; ends \_\_\_\_\_]

**Dickens Dramatic Reading Society**  
(for adults & youth)

[Title: \_\_\_\_\_]

[starts \_\_\_\_\_; ends \_\_\_\_\_]

**TUITION FEES\*\*** — Temporarily reduced 12%

Full-length plays: *Caesar & Cleopatra, King Lear, As You Like It, Twelfth Night* — \$635 \$559

Spring Workshop — \$535 \$471

Shakespeare Circle: Workshop — \$325 \$286, or Full play — \$495 \$436

Brief, Focused Workshops & Dickens Dramatic Reading Society — \$275 \$242

Rehearsal session times and/or dates our actor cannot attend: \_\_\_\_\_

(NOTE: The program normally can accommodate ONLY date conflicts written here or approved by the end of the introductory sessions Attendance is essential. Missing more than a quarter of scheduled and special rehearsals may result in loss of performances.)

IMPORTANT: Rehearsal time preference (when applicable):  
If the program for which we are registering has Saturdays of split rehearsal times (morning vs. afternoon), our actor (choose one):

has no preference

prefers mornings  prefers afternoons

MUST HAVE mornings  MUST HAVE afternoons

IMPORTANT: Do NOT choose "must" unless there is an unavoidable conflict. "Musts" make casting difficult and may limit the roles your actor can receive!

### \*\*EXPLANATION OF TUITION FEES AND POLICIES

YSP is a not-for-profit, tax-exempt organization; our fees only cover a portion of costs. YSP is committed to the principle that no one be excluded from participation because of the costs of tuition. Anyone who needs a reduced tuition can select any rate above one-half the basic tuition fee. (Please pay as much within this range as you realistically can!) The rest of your tuition is considered a scholarship. If even 1/2 the basic fee, spread over 4 monthly payments, is beyond your means, YSP will try to provide a larger scholarship or a more extended pay period, but this will depend upon the size of the scholarship fund that we accumulate.

YSP depends on voluntary contributions to the scholarship fund (these are tax deductible). The YSP Steering Committee requests that every family that can afford to do so add a tax-deductible contribution of \$50 to \$150 (more, if feasible!) to their tuition payment.

Because of the nature of YSP programs, YSP is unable to give refunds on tuition payments after the Introduction to a production has occurred.

PLEASE FILL OUT THE REVERSE SIDE, ACTOR AND PARENT SIGN, AND RETURN WITH CHECKS.

TUITION PAYMENT

Actor's Name (please submit a separate form for each actor) \_\_\_\_\_

Please fill in the amount of payment and check the appropriate line at the bottom:

Full Tuition (See Tuition Fees and Policies on reverse side.) \_\_\_\_\_

OR

Subsidized Tuition (See Tuition Fees and Policies on reverse side.) \_\_\_\_\_

Audio tapes/CDs deposit of \$20 per actor Check # \_\_\_\_\_ (Separate check, if refund desired.) \_\_\_\_\_  
(A SEPARATE, NEW DEPOSIT CHECK FOR EACH PROJECT, PLEASE. We destroyed the last one!)

Voluntary tax-deductible contribution for the scholarship fund\*  
(suggested amount: \$50 to \$150 or more) \_\_\_\_\_

Total amount: \_\_\_\_\_

Checks enclosed (check one):

\_\_\_\_\_ Full amount of Basic or Subsidized Fee

\_\_\_\_\_ Payment in 4 equal installments of \$ \_\_\_\_\_ (dated now, and on the first day of each month starting \_\_\_\_\_)  
If you choose installments, PLEASE ENCLOSE ALL CHECKS – PRESENT AND POST-DATED – WITH THIS REGISTRATION.  
Actors enrolled in more than one project may extend payment beyond 4 installments. Please indicate number \_\_\_\_\_

Name of person signing check(s): \_\_\_\_\_ Phone (h) \_\_\_\_\_ (w) \_\_\_\_\_

\*If you are unable to pay the subsidized tuition of at least one-half the basic fee, it may be possible to offer a larger scholarship or extended monthly payments depending on the amount of money in the scholarship fund. We do not want to exclude anyone because of the cost of the program.

Please make checks payable to YSP and send them with this form to: YSP, 2935 S. Fish Hatchery Rd., #126, Madison, WI 53711.

For Registrar's Use Only Tape/CD deposit: \_\_\_\_\_  
Scholarship Amount: \_\_\_\_\_  
Donation Amount: \_\_\_\_\_

NOTE ON PARENT INVOLVEMENT

A critical part of the YSP success is parent involvement and help in completing key tasks. At the initial Parents' Meeting, you will be asked to volunteer to participate in or oversee a couple of these areas — such as concession sales, media publicity, clean-up before or after performances, videotaping performances.

For minors' programs: STATEMENT BY PARENT(S)/GUARDIAN(S)—PLEASE READ AND SIGN!

Our young actor(s) would like to take part in the Young Shakespeare Players productions. (I understand that YSP cannot admit young people who do not, themselves, wish to take part.)

Our family understands and agrees that, in making this application, we are agreeing that our young actor(s) will:

1. attend all scheduled rehearsals, except for those excused in advance by the Directors (please indicate any such dates on reverse side) and except for those that must be missed because of the actor's illness or other family emergency (in which case a parent or guardian will call the Directors to clear the absence);
2. listen to instructional tapes and CDs at home in a timely manner;
3. memorize his/her part(s) according to the schedules provided during the rehearsals or in official YSP notifications;
4. act at all times with appropriate respect for and courtesy toward the Program, fellow participants, directors, volunteers, and any off-site performance hosts, and remain off YSP premises when no adults are present;
5. refrain from any use, sale, purchase, or discussion of tobacco, alcohol, or any banned substance — and refrain from any "couples behavior" — at any time on YSP premises or during YSP sessions or "breaks," or on the way to or from YSP sessions or "breaks";
6. provide opaque black tights, solid-black clothing, and black, soft-soled, flat shoes for dress rehearsals and performances;
7. pay all outstanding registration fees and deposits according to the schedule on the registration form; and also enclose (by separate check, if refund is desired) a \$20 deposit for instructional tapes and/or CDs, refundable when the tapes are returned at the end of the program.

We also agree that the Young Shakespeare Players is a not-for-profit organization and that neither the organization nor any staff member or volunteer has any liability for injury or harm that may occur to actors or their family members or companions in transit to or from rehearsals or performances, or due to accidents or other unforeseen circumstances during rehearsals or performances or "breaks." We further agree that YSP has our permission to use photos or video of our actor 1) at the playhouse, 2) on the YSP website, and 3) for the purpose of publicizing the production and/or YSP in general.

IF YOU DO NOT WANT TO GRANT PHOTO/VIDEO PERMISSION, PLEASE CHECK THIS BOX

We have read and agree to the above terms and the terms in the accompanying letter.

Signed (Parent/Guardian): \_\_\_\_\_ Date: \_\_\_\_\_

Signed by Actor: \_\_\_\_\_ Date: \_\_\_\_\_