



**KENTUCKY  
THESPIANS<sup>SM</sup>**

## **FESTIVAL CHECK LIST**

Please remember that **ALL forms must be completed for registration.**

### **TO COMPLETE TROUPE REGISTRATIONS:**

\_\_\_\_\_ EXCEL REGISTRATION FORM EMAILED (LIST OF ALL DELEGATES ATTENDING THE FESTIVAL)

\_\_\_\_\_ COMPLETED HEALTH FORMS FOR EVERY STUDENT & ADULT INCLUDING ALL REQUIRED SIGNATURES. – Each troupe director should make **three (3)** copies of each health form. Originals are sent to the Chapter Director along with registration. One of the additional sets should be kept in a file by the troupe director and brought to festival. The second set should be placed in each delegate's badge for safety.

\_\_\_\_\_ "CODE OF CONDUCT" FORMS INCLUDING ALL REQUIRED SIGNATURES. THESPIANS AND FUTURE THESPIANS ONLY

\_\_\_\_\_ A CHECK MADE PAYABLE TO KENTUCKY THESPIAN SOCIETY

**TOTAL AMOUNT ENCLOSED \$\_\_\_\_\_**

**Send all materials to:**

CAROLYN GREER, CHAPTER DIRECTOR

OWENSBORO HIGH SCHOOL

1800 FEDERICA STREET

OWENSBORO, KENTUCKY 42301

Contact: [Carolyn.greer@owensboro.kyschools.us](mailto:Carolyn.greer@owensboro.kyschools.us)

Office number: 270-686-1110 ext. 3190

Cell phone: 270-314-7072

# HEALTH FORM/PHOTO RELEASE

**ALL DELEGATES (Adults and Students) must complete and sign this form so that emergency care can be provided. All students, regardless of age, must get parent/guardian signatures. Please print and sign your name as it appears on the registration form. Read the consent portion carefully. Please complete and sign the Photo Release at the bottom.**

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

School Name \_\_\_\_\_ Troupe Director \_\_\_\_\_

Troupe # \_\_\_\_\_ select one: \_\_\_\_\_ Student \_\_\_\_\_ Troupe Director \_\_\_\_\_ Chaperone

Name of Parent or Guardian \_\_\_\_\_ Home Phone # \_\_\_\_\_

Home Address (number/city/zip) \_\_\_\_\_

Additional phone numbers \_\_\_\_\_

Delegate's date of birth/age (if under 21) \_\_\_\_\_

Medication taken \_\_\_\_\_

Allergies \_\_\_\_\_

Any medical history that would be helpful in case of an emergency:

Family Physician:

Health Insurance Carrier:

Phone:

Policy Number:

Address:

Address:

(If emergency care is administered, payment will be made by delegate, parent/guardian or their insurance carrier.)

**PHOTO RELEASE:** The undersigned hereby grants to the Kentucky Thespian Society, Inc. permission to make photographs of the attendee at KTS, Inc. 2015 State Festival for use in coverage of the event, advertising, and for any lawful purpose without compensation to the delegate. The undersigned certifies that s/he has read and fully understands this authorization.

Delegate's Signature \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_

**Your signature below authorizes consent for the Kentucky Thespian Society or it's designated representative, to contact EMT, local doctors, dentists or hospital, if deemed an emergency or otherwise necessary. This authorization does not cover major surgery unless the opinion of two licensed physicians/dentists concur in the necessity for such surgery and said opinion is obtained before the surgery is performed.**

Delegate's Signature: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date \_\_\_\_\_

**REFUSAL OF CONSENT: (to be completed only if emergency treatment is NOT to be taken)** The signature below indicates that I do **NOT** wish treatment for myself or do **NOT** give my consent for emergency medical treatment for my minor child. In the event of illness or injury requiring emergency treatment, I ask that the Kentucky Thespian Society, Inc. 1. take no action or 2. take the following action.

**To be signed only if emergency treatment is NOT to be taken!**

Delegate's Signature: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date \_\_\_\_\_

**THESPIAN’S CODE OF CONDUCT** - *Note that this form is for students only.*

Your signature, and the signature of parent/guardian, indicates that you have read, understood and agree to follow all rules.

You, or parent/guardian of a minor delegate, hereby release and agree to hold harmless the Kentucky Thespian Society, Inc., The Educational Theatre Association, and its respective agents, employees and representatives from any and all claims, demands, actions and causes of action which the undersigned may have sustained as a result of the delegate listed below participating in the Kentucky Thespian Society, Inc. Festival, October 23<sup>rd</sup> & 24<sup>th</sup> at Eastern Kentucky University. The undersigned further agrees to be responsible for him/herself while traveling to and from said conference including any expenses incurred by the delegate, caused by the delegate and/or any personal injuries which may occur to the delegate during the conference. The delegate will be returned home and parents, guardian or next-of-kin of a minor delegate will be financially responsible for all necessary costs incurred. The undersigned also realizes the Festival Registration fees cannot be refunded under any circumstances. The undersigned certifies that he/she has read and fully understands this authorization.

- I realize that my name badge is necessary to enter any event. I also realize that I must wear my badge at all times.
- I realize that my being able to attend the Kentucky Thespian Society, Inc. Festival is a privilege.
- I realize that I am representing not only my School and my Troupe but also my School District.
- I will pick up my trash. I REALIZE THAT ALL FOOD AND DRINKS ARE ALLOWED ONLY IN DESIGNATED AREAS.
- I will be attentive, cooperative and a proper THESPIAN at all times.
- I realize that the only appropriate theatre response is applause.
- I WILL NOT use cell phones or mp3 players during workshops, performances, or all conference events.
- I WILL NOT TAKE ANY PICTURES DURING A PERFORMANCE.
- I realize that if I am late, I must wait QUIETLY until I am permitted to enter.
- I realize that if I must leave a performance, I must wait until a convenient time to do so and do it quietly.
- I will respect all festival participants and all adults.
- I will not leave the campus at any time without the approval of my Sponsor.
- I will not destroy, damage, steal, take or rearrange any property that does not belong to me.
- I will attend all workshop sessions and treat all workshop leaders as professionals and with courtesy and respect. I realize that committee members and workshop leaders have the right to collect my badge, remove me from any activity and report me to the Chapter Director and my Troupe Director for discipline if I am rude, uncooperative or disruptive.
- I realize that Thespians who cannot follow the Code of Conduct will be sent home without refund of fees. A parent or guardian will be required to pick up any student who is dismissed.
- I realize that my Troupe Director can bar me from any further drama activities at my school if I break any rules at the festival event. I may also be excluded from next year’s festival and reported to my school administrator.
- I will not bring or use any weapons, drugs (except Health Form listed prescriptions), alcohol or tobacco and I understand that breaking this rule will result in my immediate removal from the conference and a referral by the Chapter Director to my school’s administrator in charge of discipline and possible legal prosecution.

Thespian’s Name: \_\_\_\_\_ Thespian’s Signature: \_\_\_\_\_

School \_\_\_\_\_ Troupe Director: \_\_\_\_\_ Troupe #: \_\_\_\_\_

Parent/Guardian’s Name: \_\_\_\_\_ Parent/Guardian’s Signature: \_\_\_\_\_

Parent’s contact numbers: Include area codes \_\_\_\_\_

## **ADDITIONAL INFORMATION FOR TROUPE DIRECTORS - PART I**

### **COMPLETING THE DELEGATE FORM ON EXCEL (This will be emailed to you upon your online registration.)**

- \* Delegate list - Please print each troupe delegates name (alphabetical order if you don't mind) and identify the "status" of each person.
- \* Status choices: Thespian, Future Thespian (students who have yet to be initiated,) Troupe Directors, Chaperones, Junior Thespians, and/or State Thespian Officers.
- \* Tee Shirt order – Everyone is invited and encouraged to purchase a tee shirt as a memento of the Kentucky Thespian Festival. This year's shirt will follow our theme closely. As soon as the design is ready, we will share with troupes. Please include your tee shirt order totals on the spreadsheet. Remember that the total on the spreadsheet should equal the number on your registration from.

### **SILENT AUCTION/RAFFLE – feel free to share!**

Each year we hold silent auction/raffle to raise money for Broadway Cares/Equity Fights Aids and this year, we will be splitting our profits to raise money for our scholarship fund to raise more money for worthy Kentucky Thespians!

If you happen to have any items you would be willing to donate to help fund these worthy causes, please bring them with you to Festival! You know the old saying, "One director's old props, are exactly what another directing is searching for!" Okay, that isn't a real quote...but you know what I mean!

### **PROFESSIONAL DEVELOPMENT**

As always, we want to make sure our teachers are taken care of! We will have two PD sessions for teachers, and other opportunities to come.

## **ADDITIONAL INFORMATION FOR TROUPE DIRECTORS - PART II**

### **SUGGESTIONS FOR YOUR THESPIANS...NOMINATE THEM...SHARE THE FUN...**

#### **State Thespian Officers**

Please take a few minutes and think about your young leaders. Do you have a sophomore who is really showing an aptitude for leadership, is out going, and would like to be a part of planning the Kentucky Thespian Festival? Maybe even a freshman who is already standing out!? The application process for the State Thespian Officers won't take any time at all and this year, we are asking that all returning troupe submit your STO applications prior to Festival. Of course, if your Thespian troupe is attending for the first time, we will give you a chance to see what KTF is all about and will accept your nominations at the event. In this packet, you will find a link to the on-line application, and also an explanation of the process. Please share this information with your students.

#### **Kentucky all-state thespians!**

As a part of our mission, we want to find opportunities to honor Kentucky's Outstanding Thespians and we have found a wonderful way to recognize one Thespian from each High School Troupe! Please take the time to look over the Kentucky All-state Thespians of 2016 form and nominate a worthy Thespian from your troupe!