

## **THEATRE33 Youth Group: Registration Packet**

1. Theatre33 Registration Guide - **Information Only**
2. Theatre33 Registration Form – **Fill & Sign**
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## THEATRE33 Registration Instructions

Welcome to the new season at Theatre33. Enclosed you will find the necessary information and materials to register for the upcoming education programs. All forms are available on our website under student login: <https://www.theatre33wa.org/youth-group>

### KEY DATES

- **September 5, 2022** - Registration begins
- **September 13, 2022 - December 4, 2022** - Fall Session
- **January 3, 2023 - March 26, 2023** - Winter Session
- **March 28, 2023 - June 18, 2023** - Spring Session

### REGISTRATION CHECKLIST (Due upon registration)

- Registration form
- Registration Fee
- Signed - Student's Code of Conduct and Participation Agreement
- Signed - Parent's Code of Conduct
- Signed - Theatre33 Class Guidelines
- Signed - Waiver of Liability for Infection from Covid-19
- Signed - Photo and Video Release Authorization

### CLASSES:

- **ALL STUDENTS** - First day will be September 13, 2021; Last day of will be June 18, 2022
- Theatre33 classes will continue through the mid-winter and spring breaks. The schedule will be published on Theatre33 website under Student Login page.

### FEES:

- **New Student Registration fee: \$50 PER STUDENT (NO discounts may be applied).**
- **Class fees:**
  - o First Year: \$180/month or \$500/session\*
  - o Second Year: \$160/month or \$450/session\*
- \* Discount on class fees (**only**) for full session payments.

**PAYMENT TERMS:**

- o Full session payments only are eligible for a discount
- o Monthly payments - 1<sup>st</sup> payment – **at registration**; Subsequent payments will be invoiced every four weeks and need to be paid within 5 days.
- o Late payments will incur a \$15 late fee.

**DISCOUNTS:**

Family Discount: 10% discount on class tuition fee for siblings. NOTE: ALL NEW STUDENTS PAY THE FULL REGISTRATION FEE.

**HOW TO REGISTER:**

All forms can be e-signed or printed out and signed and delivered to Theatre33 during registration or when joining the class. Checks are to be made payable to Theatre33, and can be delivered in person or mailed to: Theatre33, 243 169th Ave NE, Bellevue, WA 98008. We can also accept payment via credit card and you have an option to set up autopay.

**ADDITIONAL INFORMATION:**

**Session Commitment** - Upon registration, students are committing to the entire session (Fall, Winter or Spring). Class fees **will not be refunded** if students withdraw during the session. If the monthly payment option is used, **the remaining session fees will still be due. We do not issue prorated refunds for missed classes.**

**Billing** – Currently, we are able to accept tuition payments by cash, check, credit cards and Paypal (credit card processing fees are added on the invoice). You can also choose to sign up for autopay.

**FEES DUE UPON REGISTRATION - LOOK-UP TABLE:**

**Table 1A: Single Student Rates – Full Session Payment at Registration\***

<b>Class</b>	<b>Registration Fee</b>	<b>Training Fee</b>	<b>Due at registration</b>
<b>1st yr</b>	\$50	\$500	<b>\$550</b>
<b>2nd yr</b>	\$50	\$450	<b>\$500</b>

**Table 1B: Single Student Rates – Monthly Payments\*\***

<b>Class</b>	<b>Registration Fee</b>	<b>First Month</b>	<b>Due at registration</b>	<b>Second Month</b>	<b>Third Month</b>
<b>1st yr</b>	\$50	\$180	<b>\$230</b>	<b>\$180</b>	<b>\$180</b>
<b>2nd yr</b>	\$50	\$160	<b>\$210</b>	<b>\$160</b>	<b>\$160</b>

\*\* Monthly Payments - **Second and Third months payments will be invoiced and will be due in the event that the student withdraws during the session. There are no prorated refunds for missed classes.**

Note: These tables have been provided to facilitate the preparation and processing of registration forms. Although we have checked the tables for accuracy, we reserve the right to make corrections should an error exist in these tables. You are responsible for the fees specified in this document.

## Theatre33 Youth Group Class Schedule

Class	Meeting times
1st Year (Bilingual)	Wednesdays 5:00-6:15 pm Sunday 3:30 - 4:45 pm
1st Year (English only)	Wednesday 5:00-6:15 pm Sunday 2:00-3:15 pm
2nd Year (Bilingual)	Tuesday 5:00-6:15 pm Sunday 5:00-6:15 pm
2nd Year (English only)	Wednesday 5:00-6:15 pm Sunday TBD

- Winter break (No classes): 12/06/2022-1/3/2023

If classes are canceled by Theater33, they will be rescheduled.

**THEATRE33 Youth Group**  
**REGISTRATION FORM**  
**(one form per student)**

STUDENT'S NAME (print) \_\_\_\_\_ Age \_\_\_\_\_

Preferred Name: \_\_\_\_\_ Birthdate (mm/dd/yyyy) \_\_\_\_\_ Sex \_\_\_\_\_

Home Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_

Email Address \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ Zip Code \_\_\_\_\_

Parent(s) or Guardians Name(s) \_\_\_\_\_

School District Student Attends \_\_\_\_\_

Person to be notified in case of emergency, if parent unavailable

Name \_\_\_\_\_ Phone # \_\_\_\_\_

Does the student have any allergies, illness, or physical limitations, or other problems that you would like to share? \_\_\_\_\_

\_\_\_\_\_

**FEES:**

**(see Registration Guide for explanation of fees)**

**Class: First Year \_\_\_\_\_ Second Year \_\_\_\_\_ Russian \_\_\_\_\_ English \_\_\_\_\_**

**Registration Fee: \$50**

**Class Fee: Session: \_\_\_\_\_ (1st year - \$500; 2nd Year - \$450)**

**Or Monthly: \_\_\_\_\_ (1st year - \$180; 2nd year - \$160)**

I hereby release Theatre33, its owner, instructors, officers, board members and/or representatives from any liability which may arise out of my child's participation in any of said activities, games, practices, or participation in class, and to hold said entity, its officers, board members, instructors, and/or representatives harmless from any expense or claim for damages which may be incurred on behalf of such child for any injury or accident which may occur in connection with such child's participation herein.

I understand that Theatre33 is a non-profit 501(c)(3) organization, with maintenance and operations supported by the parents of the students, and other interested parties, and I agree to reasonably assist in the activities of the program when requested to do so.

I agree to abide by the rules and regulations of Theatre33 in making this application for my above-mentioned child to participate in Theatre33's Youth Group program during the current season.

SIGNED \_\_\_\_\_

NAME: \_\_\_\_\_

DATE \_\_\_\_\_

**Please deliver payments and registration to:**

**Theatre33, Irina Bogdanova**

**or mail your registration packet to:**

**Theatre33, 243 169th Ave NE, Bellevue, WA 98008**

**ALL CLASS CORRESPONDENCE WILL BE VIA E-MAIL ADDRESS AND/OR PARENT PHONE NUMBER(S)  
PROVIDED ABOVE AND ON OUR WEBSITE STUDENT PAGE**

## Student's Code of Conduct and Participation Agreement

Congratulations! You are about to be a part of something really special!

Parents, please take the time to read the following with your actors. When you finish, sign that you both have read and understand what will be expected during the classes. Theatre is fun and creative, but is also a big commitment. Your director and your fellow actors want you to succeed. To be successful you are expected to be at every rehearsal/class.

I \_\_\_\_\_ (actor's name) and  
\_\_\_\_\_ (parent's name) understand that,

- I will follow the rules and be respectful of my instructor and my fellow actors.
- If I have any problems or questions I can always talk to the instructor before and after class.
- Like all performing arts, it takes practice outside of rehearsals. I will come prepared with the work the instructor has assigned.
- I will challenge myself to make new friends and have new experiences. I will treat all actors as my friends and support them through this adventure.
- I will have fun and keep communicating with all the adults that are here to help me.
- If I know that I have to be absent, running late, or leave early, I will tell my instructor beforehand.

### **Unacceptable Behavior:**

- Refusing to follow the guidelines and rules
- Using profanity, vulgarity or obscenity
- Stealing or damaging property
- Disrupting the program

STUDENT \_\_\_\_\_ DATE \_\_\_\_\_

PARENT/GUARDIAN \_\_\_\_\_ DATE \_\_\_\_\_



## Parent's Code of Conduct

As parent(s) of a Student of Theatre33 Youth Group, I/we agree to the following:

### **General Guidelines:**

- Treat instructors, parents, facility staff, and students courteously and with respect at all times. Let the words you speak be uplifting to that person.
- Stay informed by reading all class communications.
- Keep my contact information up to date and regularly monitor my email for class information.
- Encourage/ensure my student(s) attend classes regularly and punctually.
- Communicate any concerns or suggestions directly to my student's instructor or the Youth Education Program Director.
- Should I choose a monthly payment option, to submit payment within 5 days of receiving the invoice.
- In the event that my student(s) chooses to discontinue attendance mid session, I understand that I am still responsible for the remaining monthly payments.
- Respect the instructor's decision with regards to teaching. If I have a concern that I feel is not being addressed by the instructor, and I feel that I am not able to communicate my concern with the instructor, I will contact the Youth Education Program Director.

**By signing this form, I am committing to meeting the guidelines and expectations contained herein. I understand that failing to do so may result in actions taken by Theatre33 staff and management as deemed appropriate.**

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

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

## **Theatre33 Class Guidelines**

Theatre33 Class Guidelines were prepared based upon the COVID-19 requirements at the time this was written. Theatre33 will follow the latest Washington State COVID-19 guidelines and recommendations posted at <https://coronavirus.wa.gov/>

### **Personal Protective Equipment Requirements:**

- Wearing masks is optional for students and instructors.

### **Social Distancing Requirements:**

- Students and instructors must maintain 3 feet distance at all times as deemed possible.

### **Facility Procedures:**

- All common areas, including restrooms, will be disinfected routinely.

### **Emergency Procedures:**

- In the student is hurt in any way, the parent/guardian will be notified immediately for serious or potentially serious cases (head injury, excessive bleeding, broken limb, seizure, etc.) or at the end of the day for non-serious injuries/incidents (anything out of the ordinary or if the student is not acting like him/herself). In all cases, a written report will be shared with the parent/guardian by the end of the day.

### **Student/Family Protocol:**

- Students should bring their own water bottle (already filled). Please do not store bottles at the facility and do not share water bottles.
- Any student or staff member experiencing any symptoms of a fever, recent cough, unusual fatigue, headache or has had any exposure to someone who has any symptoms should remain at home and seek medical treatment.

### **Illness policy for sick students**

- **If any student or staff member has a fever or symptoms of illnesses, they may not attend class.**
- If your student appears ill, we will isolate him/her and contact you to determine the course of actions.
- It is our policy to prioritize the health and safety of all students, thus children who appear to be infectious or who demonstrate physical symptoms that require continual one-to-one care will be isolated from others.

### **When to stay home and when to return:**

- Fever over 101 degrees

May return when: please abide by current CDC guidelines. In general: the temperature has been below 100 degrees for 24 hours without Tylenol or other medicines, test for Covid-19 is negative, or 14 days of isolation.

- Recurrent Vomiting

May return when: the child has been diagnosed as having a bacterial infection and has been on antibiotics for 24 hours.

- Diarrhea (more than 3 times within a short time period)

May return when: it has been 24 hours since the last episode of vomiting or diarrhea without medication.

- Eye Discharge

May return when: eyes are no longer discharging, or the condition has been treated with an antibiotic for 24 hours.

- Excessive cough and/or nasal discharge

May return when: please abide by current CDC guidelines. In general: the temperature has been below 100 degrees for 24 hours without Tylenol or other medicines, test for Covid-19 is negative, or 14 days of isolation. The discharge is not thick, yellow or green

- Any unidentified rash

May return when: the rash has subsided, or the physician has determined that the rash is not contagious.

Parents are required to notify Theatre33 staff if their child will not be in attendance due to illness on a scheduled day. If your child becomes ill while in class, we will contact you by phone. Please pick up your child within one hour of the phone call. Parents should have an alternate plan of action for childcare to cover these situations.

**Positive Test Procedure:**

- Please follow Washington State COVID-19 guidelines and recommendations posted at <https://coronavirus.wa.gov/>

By signing below, the student and parent(s)/guardian(s) have read, understands, and agree to comply with Theatre33 Class Guidelines.

Student \_\_\_\_\_ signature \_\_\_\_\_ name

Parent/Guardian \_\_\_\_\_ signature \_\_\_\_\_ name

Parent/Guardian \_\_\_\_\_ signature \_\_\_\_\_ name

Date \_\_\_\_\_

## **Theatre33**

### **Waiver of Liability for Infection from COVID-19**

It is my wish to participate in the activities ("Activities") offered by Theatre33 ("Theatre") during the time-period of the spread of the infectious disease otherwise known as COVID-19. Activities included but are not limited to lessons at the Theatre's facility, whether as a student, volunteer or a spectator. In order for the Theatre to continue to accept me as a participant in the Activities during this extraordinary time, I represent and agree as follows:

1. I have made the decision to participate in the aforementioned Activities despite social distancing recommendations from the Governor of Washington with full knowledge of my medical history and current medical status and, therefore, hold the Theatre harmless from any injury, advancement of illness, or death from participating in said Activities;
2. I am aware of the Theatre's attempts to keep the facility disinfected and I am conscious of their hygiene protocols, which include the sanitizing hands or washing of hands with soap and water for a minimum of 20 seconds before and after every lesson;
3. I understand that the nature and purpose of Activities in the facility include distances that may be closer than the recommended, and I especially recognize that the very nature of said Activities may place me at higher risk for contracting the disease; therefore, I release, discharge, and absolve the Theatre, its owners, board members, and affiliates from any and all liability or responsibility for any such advancement of illness or contraction of disease. This release shall be binding upon my heirs, executors, administrators, and assigns.
4. I agree to abide by all theatre policies with regards to the hygiene recommendations of the Public Health Authority, the Governor of Washington, and the CDC; I realize that the same may be changed from time to time.
5. I take it upon myself to watch the status of my health by following CDC guidelines for self-diagnosis of COVID-19, and agree to inform the owners of the Theatre immediately should I begin to exhibit symptoms of COVID-19 or I am found to be positively infected with COVID-19.
6. If any part of this Waiver is to any extent held to be invalid or unenforceable, the remainder of this Waiver shall not be impaired or affected thereby and shall continue in full force and effect.

I have read this Waiver and understand all its terms. I execute it voluntarily and with full knowledge of its significance.

By signing below, I accept the terms and conditions of participation.

\_\_\_\_\_  
Print name of Participant

\_\_\_\_\_  
Print name of Guardian

\_\_\_\_\_  
Signature of Participant or Guardian

\_\_\_\_\_  
Date

**Theatre33**  
**Photo and Video Release Authorization**

I grant to Theatre33 the right to take photographs and/or video of me and my family in connection with their classes, performances, parties and events. I authorize Theatre33, its assignees and transferees to copyright, use and publish the same in print and/or electronically. I agree that Theatre33 may use such photographs and/or videos of me and my family with or without my name and for any lawful purpose, including, for example, such purposes as publicity, illustration, advertising, social media and web content and grant applications. I will speak with management to discuss my options

I have read this Photo and Video Release Authorization and understand all its terms. I execute it voluntarily and with full knowledge of its significance.

By signing below, I grant authorization to use photographs and/or video.

\_\_\_\_\_  
Print name of Participant

\_\_\_\_\_  
Print name of Guardian

\_\_\_\_\_  
Signature of Participant or Guardian

\_\_\_\_\_  
Date