

Panther Playhouse is Kirkland Middle School's after school student theatre group and we thank you for considering taking part in an original adaptation of <u>The Tempest</u>. We hope to make this an extraordinary experience that they will cherish.

- 1. This first page is yours to keep and includes a schedule on the back.
- 2. Turn in remainder of packet to KiMS office.
 - a. Upon our receipt of your form you will be emailed a link to sign up actors for an audition slot.
- 3. Guardian must attend parent meeting on Mon Apr 27 at 7pm.
 - a. We will chat about the show and what we hope to accomplish.
 - b. Answer any questions about the process.
 - c. Sign up for an audition time slot, chaperone dates, and committee.
 - d. Parent responsibilities: http://parent.pantherplayhouse.org
- 4. Turn in check for \$100 (\$50 for crew) made out to "KiMS PTSA" at the parent meeting.
 - a. The fee will not be a barrier to any student that wants to participate.
 - i. There is a checkbox on the form to request a scholarship for a student..
 - b. Refunds cannot be issued after the auditions.
 - c. We ask for a shirt size since all participants will receive a production t-shirt.
- 5. Actor must prepare a memorized monologue for their audition slot on Mon May 4.
 - a. Monologues should be under two minutes in length.
 - b. Monologues and Audition Tips: http://audition.pantherplayhouse.org
 - c. Actors may reach out to me directly if they have questions or need assistance.
 - d. Actors will receive their role at our first reading rehearsal on Wed May 6.
- 6. Please note the schedule for rehearsal dates and student requirements.
 - We happily work around conflicts, including emergency ones just communicate them.
 - b. "MANDATORY" dates are mandatory including the performances.
 - c. Note your known conflicts on the schedule on "RETURN TO OFFICE" page.
 - d. Each week we will notify you which rehearsals the actors are called for.
 - e. All students must read and sign the "Commitment to Success" page.
- 7. Second half of final page is a PTSA Membership form.
 - a. We highly recommend all families involved in Panther Playhouse be KiMS PTSA members.
 - b. If you need financial assistance to become a member, please contact us.
 - c. Ignore the membership form if you are already a PTSA member.

Johnmichael P. Monteith director@pantherplayhouse.org - (425) 223-3298

Jessica Reeg producer@pantherplayhouse.org - (623) 694-4742

The Tempest

Required: Parent Meeting - Mon Apr 27 at 7pm

Su	Sunday	2	Monday		Tuesday	We	Wednesday	F	Thursday		Friday	Saturday
ო	MAY	4	3:15 - 6:00	Ŋ	3:15 - 6:00	9	1:45 - 5:00	_	3:15 - 6:00	œ	3:15 - 6:00	6
		SET A	SET AT PARENT MTG	<u>ა</u>	(Collage Concert) MANDATORY	< :	MANDATORY					
10	10 MAY	11	11 3:15 - 5:15	12	12 3:15 - 6:00	13	13 1:45 - 5:00	14	14 3:15 - 6:00	15	15 3:15 - 6:00	16
		M. CRE	<i>MANDATORY</i> CREW REHEARSAL									
17	17 MAY	18	18 3:15 - 6:00	19	3:15 - 6:00	20	20 1:45 - 5:00	21	21 3:15 - 6:00	22	LEAP Day	23
24	MAY	22		5 6		27	27 1:45 - 5:00	78	28 3:15 - 6:00	5	3:15 - 6:00	30
31	MAY	-	3:15 - 6:00	7	3:15 - 6:00	m	1:45 - 5:00	4	3:15 - 6:30	2	3:15 - 6:30	9
		ACTO	ACTORS OFF BOOK					TECH	TECH - FIRST HALF	TECH	TECH - SECOND HALF	
7	JUNE	œ	3:15 - 6:00	6	3:15 - 7:15	10		11	3:15 - 6:45	12	5:30 - 9:00	13 6:00 - 9:00
<u> </u>	TECH WEEK	Σ	MANDATORY	•	MANDATORY			Σ	MANDATORY		MANDATORY	MANDATORY
		CHC	CHOIR CONCERT	ш	FIRST DRESS			H	FINAL DRESS			CAST PARTY AFTER
			TECH WEEK		TECH WEEK		TECH WEEK		TECH WEEK	OP	OPENING NIGHT	CLOSING NIGHT

TYPE OF REHEARSAL OR LOCATION INFO

THESE ARE DIRECTORS NOTES - IGNORE

Key for Calendar: TALICS MEANS IMPORTANT INFORMATION



RETURN TO OFFICE

SPRING SHAKESPEARE PARTICIPATION FORM

Please complete the following pages, including listing conflicts on back page, and send to KiMS office.

Questions? Contact Johnmichael at director@pantherplayhouse.org / 425-223-3298

Full Name (First Last):		Gender:	☐ Female ☐ Male
School:	☐ KiMS ☐ Other:	Grade:	□6 □7 □8
Student Email Address:			
Shirt Size:	Youth: ☐ Small ☐ Med ☐ Large	Adult: ☐ Small ☐] Med □ Large □ XL □ XXL
Acting/Crew Experience:			
Vocal Training / Choir:			
Dance / Gymnastics:			
Musical Instrument:			
Critical Question: If it was rai	ning tacos, would you eat one?		
Please list any additional info	ormation you would like to share with	the director:	
Participation Type:	☐ Actor (\$100) ☐ Crew (\$50) Pay at http://pay.pantherplayhouse.com		quest Fee Reduction made out to: KiMS PTSA
Parent/Guardian Name:		Phone Number:	
Email:			
Parent/Guardian Name:		Phone Number:	
Email:			

NOTE ANY CONFLICTS ON CALENDAR BELOW

The Tempest

Required: Parent Meeting - Mon Apr 27 at 7pm

Sı	Sunday	Monday		Tuesday	We	Wednesday	F	Thursday		Friday	Saturday
3	MAY	4 3:15 - 6:00	2	3:15 - 6:00	9	6 1:45 - 5:00	7	3:15 - 6:00	8	3:15 - 6:00	6
		SET AT PARENT MTG) (C	(Collage Concert) <i>MANDATORY</i>	٠	MANDATORY					
		AUDITION)	CALL BACKS	FIRS	FIRST READ-THRU					66 Hours
10	10 MAY	11 3:15 - 5:15	12	12 3:15 - 6:00	13	13 1:45 - 5:00	14	14 3:15 - 6:00	15	15 3:15 - 6:00	16
		<i>MANDATORY</i> CREW REHEARSAL									
17	17 MAY	18 3:15 - 6:00	19	19 3:15 - 6:00	20	20 1:45 - 5:00	21	21 3:15 - 6:00	22	LEAP Day	23
24	MAY	25	26		27	1:45 - 5:00	28	28 3:15 - 6:00	59	3:15 - 6:00	30
31	MAY	3:15 - 6:00	7	3:15 - 6:00	m	1:45 - 5:00	4	3:15 - 6:30	S	3:15 - 6:30	9
		ACTORS OFF BOOK					TECH	TECH - FIRST HALF	TECH	TECH - SECOND HALF	
7	JUNE	8 3:15 - 6:00	6	3:15 - 7:15	10		11	11 3:15 - 6:45	12	12 5:30 - 9:00	13 6:00 - 9:00
<u> </u>	TECH WEEK	MANDATORY		MANDATORY			Σ	MANDATORY		MANDATORY	MANDATORY
		CHOIR CONCERT		FIRST DRESS			₪	FINAL DRESS			CAST PARTY AFTER
		TECH WEEK		TECH WEEK		TECH WEEK	L	TECH WEEK	OP	OPENING NIGHT	CLOSING NIGHT

TYPE OF REHEARSAL OR LOCATION INFO

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Key for Calendar: ITALICS MEANS IMPORTANT INFORMATION

RETURN TO OFFICE

SPRING SHAKESPEARE PARTICIPATION FORM

COMMITMENT TO SUCCESS

All students involved must carefully read, take to heart and sign the following document to demonstrate their commitment to the success of our production.

- 1. We will always demonstrate the best of our abilities.
 - a. I shall give this production, no matter what my role, my full effort and enthusiasm.
 - b. I shall focus all my energy on the production during rehearsals and performances.
 - c. I shall never do anything that could be unsafe to me or others.
 - d. I shall have fun and never lose my passion.
- 2. We will work together for our mutual success.
 - a. I shall support every individual involved as part of our family.
 - b. I shall ignore desires for personal gratification and embrace the needs of the play.
 - c. I shall avoid making any remark that is not intended to help the recipient.
 - d. I shall be prepared every day and responsible for collecting any information I missed.
- 3. We will be gracious in our acceptance of both praise and constructive criticism.
 - a. I shall inspire others through my acceptance of constructive feedback.
 - b. I shall welcome feedback as a positive development in my personal education.
 - c. I shall recognize my own faults and avoid finding fault in others.
 - d. I shall ignore all feedback that is presented from a negative place.
- 4. We will respect the process and have trust in those we work with.
 - a. I shall be patient and have confidence in the artistic process.
 - b. I shall avoid any activity that could interrupt a rehearsal or production.
 - c. I shall not alter any part of the production without permission from the director.
 - d. I shall not do anything that might disrupt the illusion of the play for the audience.
- 5. We will show kindness and respect to all those we work with.
 - a. I shall speak in kind words, listen carefully and serve as a positive role model.
 - b. I shall respect the rules of the space where I work and will keep it clean and orderly.
 - c. I shall use stage set pieces, properties and costumes with care.
 - d. I shall make choices that assure theatre arts will stand as a more positive and welcoming environment thanks to my participation.

Student Signature	Today's Date

RETURN TO OFFICE

MEDICAL INFORMATION

Complete top half of page only if there is a potential medical concern.

Student Full Name:	Parent Full Name:
List Any Food Allergies:	
Explain Any Serious Medical Condition: (examples: diabetes, epilepsy,	, severe asthma, or cardiac/heart conditions)
Explain any health condition or behavioral / emotional challenges t	hat may impact your student:
I, the undersigned parent/guardian of the student, acknowledge the possibility that par	
the student. I hereby release, discharge and agree to hold harmless NEW GLOBE, Kill participation. I further authorize NEW GLOBE and KiMS PTSA volunteers to obtain me	edical care for my child in case of an emergency. I certify that I
have read, understood, and agree to the above conditions, and that the information pro-	ovided is complete and accurate to the best of my knowledge.
Parent Signature:	Date:
PTSA MEMBERSHIP	
Only complete if you are not currently a KiMS PTSA member. Include	• •
Director will remove this lower portion and route to PTSA Members	hip for processing.
Student(s) Name(s):	
Parent(s) or Guardian(s)	Email address
$\ \square$ My company will match my donation. I will apply for matching fu	unds online through my company's website.
Company Name:	

Family membership (includes up to 2 adults)

Individual adult memberships

"The Big Give" Donation (Optional)

Please make checks payable to KiMS PTSA, attach to the form and return to the school office.

Total

THANK YOU! Questions? Contact us at membership@kirklandptsa.org

Tax Deductions: The KMS PTSA is a 501(c)(3) organization and your donation is tax-deductible as provided by law.