



Welcome to Panther Playhouse, Kirkland Middle School's after school student performing arts company. The participants will be voyaging on a Disney cruise ship caught in a magical storm created by a wizard seeking vengeance on his duplicitous brother. We mostly stick with Richard Carter's rhymed couplet Shakespeare script while adding adapted Disney songs tied to a new subplot involving another family and the Disney employees (faces and furries) that get them through the shipwrecked ordeal. Actors will learn about the great (and not so great) features of <u>The Tempest</u>, the heroes in the costumes at Disney, as well as all of the unique elements of Shakespearean acting while creating this unique show.

- No previous experience is necessary!
 - o lust bring a desire to try something new. Visit our website at PantherPlayhouse.org to learn more.
- Review this introduction letter and rehearsal schedule with your family to verify requirements can be met.
 - Typically the student completes the participation form on front of page 2.
 - Parent and student work together to note all schedule conflicts on the back of page 2.
 - They are not needed for every rehearsal and we can work around most scheduled conflicts.
 - Student carefully reads and signs agreement on page 3.
 - Parent should complete the forms, if they are applicable, on the final back page of the packet.
- Please complete and turn-in pages 2-5 as soon as they are completed.
 - This gives the director more time to make certain we have quality roles for every actor.
 - Keep this page (page 1) to post the rehearsal calendar (on the back of page) to your fridge.
- Student Requirements
 - Actors
 - Memorize a monologue from 30 to 120 seconds in length for auditions on 4/11, 4/12.
 - Need a monologue or new to this audition thing? No problem! Email director, or:
 - https://www.pantherplayhouse.org/for-students
 - A standard contemporary monologue is great! But you can try a Bard one, if you wish.
 - Required call backs (where actors read scenes) on Wed April 13.
 - Crew
- All crew positions are filled for this production.
- Parent Requirements
 - At least one guardian must attend the in-person parent meeting on Monday March 28 at 7pm.
 - We will explain the whole process and answer all of your questions.
 - Students are welcome but we focus on their questions at the auditions / crew meeting.
 - Pay online at http://pay.pantherplayhouse.org/ before the auditions on April 11.
 - The participation cost is \$120 for actors and \$50 for crew.
 - The fee will not be a barrier to any student that wants to participate.
 - There is a spot on the participation form to ask for a fee reduction.
 - Parents serve six hours of chaperone (2 rehearsals) for each participant and serve on a committee.

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

Meredith Rasche producer@pantherplayhouse.org (608)609-9253

NOTE ANY CONFLICTS ON CALENDAR BELOW

The Tempest

Required: Parent Meeting - Mon Mar 28 at 7pm

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
10 APR	11 3:15 - 6:00 12 3:15 -	12 3:15 - 6:00	13 1:45 - 5:00	14 3:15 - 6:00	15 3:15 - 5:15	16
	SET AT PARENT MTG AUDITION	SET AT PARENT MTG AUDITION	ACTOR MANDATORY CALL BACKS	<i>ACTOR MANDATORY</i> FIRST READ-THRU	<i>CREW MANDATORY</i> CREW REHEARSAL	74 Hours
17 APR	18 3:15 - 6:00	19 3:15 - 6:00	20 1:45 - 5:00	21 3:15 - 6:00	22 3:15 - 6:00	23
24 APR	25 3:15 - 6:00	26 3:15 - 6:00	27 1:45 - 5:00	28 3:15 - 6:00	29 3:15 - 6:00	30
1 MAY	2 3:15 - 6:00 ACTORS OFF BOOK	3 3:15 - 6:00	4 1:45 - 5:00	5 3:15 - 6:00	6 3:15 - 6:00	7
8 MAY	9 3:15 - 6:00	10 3:15 - 6:00	1.45 - 5:00	12 3:15 - 6:00	13 3:15 - 6:00	14
15 MAY	15 MAY 16 3:15 - 6:45	17 3:15 - 6:45	18 1:45 - 6:00	19 3:15 - 6:45	20 5:30 - 9:00 21 6:00 - 9:00	21 6:00 - 9:00
TECH WEEK	MANDATORY - ALL TECH - FIRST HALF	MANDATORY - ALL TECH - SECOND HALF	MANDATORY - ALL DRESS REHEARSAL	MANDATORY - ALL FINAL DRESS	MANDATORY - ALL	MANDATORY - ALL CAST PARTY AFTER
	KiMS	KiMS	KiMS	KiMS	OPENING NIGHT	CLOSING NIGHT

TYPE OF REHEARSAL OR LOCATION INFO

THESE ARE DIRECTORS NOTES - IGNORE

Key for Calenda ITALICS 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

Student First Name:		Last Name:	
Preferred Pronoun:		Grade:	□6 □7 □8
Student Email Address:			
Shirt Size:	Youth: ☐ Small ☐ Med ☐ Large	Adult : □ Small	☐ Med ☐ Large ☐ XL
Acting/Crew Experience:			
Vocal Training / Choir:			
Dance / Gymnastics:			
Musical Instrument:			
What is your favorite Disney	character?		
What is your favorite Disney	show with a storm?		
Please list any additional info	ormation you would like to share with	the director:	
Participation Type:	☐ Actor (\$120) ☐ Crew (\$50) Pay at http://pay.pantherplayhouse.o		Request Fee Reduction ck made out to: KiMS PTSA
Parent/Guardian Name:		Phone Number	:
Email:			
Parent/Guardian Name:		Phone Number	:
Email:			

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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

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.

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

Explain Any Serious Medical Condition: (examples: diabetes, epilepsy, severe asthma, or cardiac/heart conditions) Explain Any Serious Medical Condition: (examples: diabetes, epilepsy, severe asthma, or cardiac/heart conditions) Explain any health condition or behavioral / emotional challenges that may impact your student: certify that I have identified all potential medical concerns, and that the information provided is complete and accurate to the best of my knowledge. Parent Signature: Date: Date: PTSA MEMBERSHIP Drily complete if you are not currently a KiMS PTSA member. Include a separate check to "KiMS PTSA" for payment. Director will remove this lower portion and route to PTSA Membership for processing. Student(s) Name(s): Parent(s) or Guardian(s) Email address My company will match my donation. I will apply for matching funds online through my company's website. Company Name:	Student Full Name:	Parent Full Name:
Explain any health condition or behavioral / emotional challenges that may impact your student: certify that I have identified all potential medical concerns, and that the information provided 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 a separate check to "KiMS PTSA" for payment. Director will remove this lower portion and route to PTSA Membership for processing. Student(s) Name(s): Parent(s) or Guardian(s)	List Any Food Allergies:	
certify that I have identified all potential medical concerns, and that the information provided is complete and accurate to the best of my knowledge. Parent Signature:	Explain Any Serious Medical Condition: (examp	les: diabetes, epilepsy, severe asthma, or cardiac/heart conditions)
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Parent(s) or Guardian(s) Email address My company will match my donation. I will apply for matching funds online through my company's website.		
☐ My company will match my donation. I will apply for matching funds online through my company's website.	Student(s) Name(s):	
	Parent(s) or Guardian(s)	Email address
Company Name:		
	-	
PTSA memberships and BIG GIVE donation Quantity Fee Total * \$25 = \$	DTCA was and purchased by COVE day attack	Quantity Fee 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.

× \$15 = \$

Total