

**The Ensemble Theatre**  
Young Performers Program  
**WINTER BREAK-OUT APPLICATION**



Student Name \_\_\_\_\_ Age \_\_\_\_ Grade Level \_\_\_\_\_

Parents/Guardians Information:

Names \_\_\_\_\_ Relationship \_\_\_\_\_

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

Home Phone \_\_\_\_\_ Mom Work \_\_\_\_\_ Mom Cell \_\_\_\_\_  
Dad Work \_\_\_\_\_ Dad Cell \_\_\_\_\_

Email: (Mom \_\_\_\_\_ Dad \_\_\_\_\_)

Program Dates: **December 19-30, 2016** Hours: **8AM-4PM** Extended Day: **7:30AM – 6PM –Cost - \$100.00**

Program Cost: **\$280.00** Form of Payment: Cash \_\_\_ Check \_\_\_ Visa \_\_\_ MasterCard \_\_\_ Discover \_\_\_ AMEX \_\_\_

Credit Information:

Card # \_\_\_\_\_ Expiration Date \_\_\_\_\_ V-Code \_\_\_\_\_

Name (as it appears on card) \_\_\_\_\_

Parental Consent:

I hereby grant The Ensemble Theatre the right to record, exhibit or otherwise use my child's name, likeness, photograph, voice and biographical data in materials to advertise, promote and publicize The Ensemble Theatre and The Ensemble theatre's Young Performers Program.

Signature: \_\_\_\_\_

Medical Information:

1. Any illness or medical condition that would prevent the enrollee from participating in physical exercise, dance, etc.? Yes \_\_\_ No \_\_\_ If yes, please specify \_\_\_\_\_

2. Is enrollee taking any type of medication? Yes \_\_\_ No \_\_\_ If yes, please list name of medication(s) and reason for use: \_\_\_\_\_

3. Allergies (if any) \_\_\_\_\_

\_\_\_\_\_

Emergency Contact Other than Parents:

Name \_\_\_\_\_ Relationship to Child \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Relationship to Child \_\_\_\_\_ Phone \_\_\_\_\_

Authorization for Pick-up (Other than Parents)

Name \_\_\_\_\_ Relationship to Child \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Relationship to Child \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Relationship to Child \_\_\_\_\_ Phone \_\_\_\_\_

YPP Payment Policy and Deadline:

All fees and tuition must be paid in full by Friday, December 16, 2016. Tuition is non-refundable. Fee is not pro-rated for absences, vacation, or disciplinary action. NO EXCEPTIONS.

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

**For More Information Call: Teresa A. White, Artistic Associate at (713) 807-4309 or [twhite@ensemblehouston.com](mailto:twhite@ensemblehouston.com)**

Mail Application: The Ensemble Theatre, Attn: Young Performers Program, 3535 Main ST, Houston, TX 77002