

Parent Participation Policy/Contract

In order for my child(ren) to participate in the River City Theatre Company's Production of **Seussical, the Musical**, I must volunteer my time to one (or more) Parent Participation Team(s).

I understand and agree that: (please initial next to each line)

_____ 1. One Parent from each Family is required to work on a specific team. I will be assigned to a team by the Board of Directors based on the needs of the production.

_____ 2. My Volunteer Commitment runs from First Rehearsal (August 19) through Last Performance (November 10, 2016), regardless of number of hours completed. **I must work until the job is done.**

That commitment is outlined as follows (always check with your Team Leader regarding need):

* The *minimum* number of hours I may be needed to work is 35.

* I *may be needed* to work during Tech Weekend and Tech Week (October 27 – November 2, 2016).

* I *may be needed* during the weekday Field Trip Performances (mornings of Nov. 8 & 9, 2016).

* I *may be needed* to work at **ALL Performances**, including opposite cast performances.

* I *may be needed* to help with Load-Out after the Last Performance closes (November 10, 2016).

_____ 3. I must check in with my Team Leader at the Beginning and End of each shift I work, or I may be counted as a No-Show.

_____ 4. If the work for my team has been completed, or it hasn't started yet, I could be asked to temporarily work with another team as needed.

_____ 5. I am responsible for staying in constant contact with my Team Leader throughout the season. I will reply to him/her in a timely manner, and I will promptly sign up with him/her for shifts. If I have not heard from my Team Leader on a regular basis, I will reach out to him/her.

_____ 6. If my Spouse chooses to sign up for a team (either same or different team as me), he/she is required to make the same FULL commitment as me, as outlined above. **No exceptions.**

_____ 7. **Failure to comply with the above Parent Participation Policy will result in a fine of \$100 AND my child(ren) might not be allowed to participate in the next RCTC production.**

Parent's Signature

Date

Parent's Name: _____

First

Last

Parent's Phone Number: _____ (Home/Cell) *(Circle One)*

Parent's Email Address: _____ *(Please write clearly)*

Parent's Home Address: _____

I am **BEST** reached via: (Circle One) Email Text Phone

Cast Member(s): _____

First

Last

First

Last

First

Last

First

Last