



Willard Middle School Drama Club Participation Form 2023-2024



As the parent or legal guardian of _____, I give my permission for him/her to participate in the Willard Middle School Drama Club program.

I understand that the regular Drama Club meetings are **every Thursday** and will usually last from the end of school **until 3:30 PM**. Students are encouraged to attend whenever they can. I agree to pick my student up at the middle school promptly at the end of each meeting or make ride arrangements for them to be picked up at 3:30. If my child is involved in the play/musical (optional), those practices will usually last from the end of school until 5:00 or 6:00 PM.

I authorize Ms. Graves, Mr. Gambriel, and/or other adult sponsors to give consent to arrange for emergency care, and I agree to pay for such services in the event that it is needed. (I understand that the school does not carry insurance on individual students.)

I understand that there is a **one-time club membership fee of \$15**. Please indicate below how you would like your membership fees to be used. Other optional club activities outside of meetings, such as Springfield Little Theatre or Hammons Hall shows, will have a discounted cost associated with them. Depending on available club funds and fundraising, Drama Club will offset the cost of activities as much as possible. We are always able to provide a few scholarships for those unable to pay for club activities due to the generosity of others..

All club checks can be made payable to WMS

****Parents AND Students- Please sign up for club text or email notifications ****

(all communication sent thru this)

Text- @4dramaclub to 81010 AND/ OR

visit rmd.at/4dramaclub for the app or to receive email notifications

Parents Complete:

_____ Parent/ Guardian Signature _____ Date

Name of Parent/ Guardian: _____ Relationship to Student: _____

Phone #: (home/cell) _____ Email: _____

Contact person if you cannot be reached in case of an emergency:

Name: _____ Relation: _____ Phone #: _____

This year we would like you to choose what you want the membership fee (\$15) to be used for: (please select)

- Please take \$15 off a ticket of my choice to attend a show with WMS.
- Please put my \$15 towards a membership scholarship for a student who is unable to pay.
- Please use my \$15 to pay for this year's club t-shirt. (info to purchase and order form is on back)

Students Complete:

I, (your name) _____, intend to participate in WMS Drama Club for this school year. I will report to the Black Box Theatre no later than 2:40 PM. I understand that, as a school sponsored program, all school policies apply to my participation in the Drama Club. I also understand that Drama Club membership is a privilege that can be taken away if I do not follow the rules. I will be respectful to my fellow club members as well as to all sponsors of the club.

_____ Student Signature _____ Date

IMPACT Teacher: _____ Grade: _____

Drama Club T-shirt Order Form:

Lime green t-shirt with navy and white front/back



Check all that apply:

- My club fee will cover the cost of this shirt.** (indicated on membership form)
- I am paying for a club member's shirt.**
- I am purchasing an additional** (non club member) **shirt(s).**

\$15 per shirt

STUDENT NAME: _____ IMPACT Teacher: _____

Size:	Quantity:	Subtotal:
Youth Large	_____	X \$15 = \$_____
Adult Small	_____	X \$15 = \$_____
Adult Medium	_____	X \$15 = \$_____
Adult Large	_____	X \$15 = \$_____
Adult X-Large	_____	X \$15 = \$_____
Adult XX-Large	_____	X \$15 = \$_____
Adult XXX-Large	_____	X \$15 = \$_____

TOTAL: \$ _____

Checks or cash. Make checks payable to WMS.

All orders are due to Ms. Graves by **Thursday, September 14th.**