|  |  |  |  |
| --- | --- | --- | --- |
| Summer Film Camp Expose | | | |
| Applicant Information Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
| Name: | | | |
| Date of birth: | SSN: NA | | Phone: |
| Current address: | | | |
| City: | City | | ZIP Code: |
|  | State | | How long? |
|  | | | |
| Name of School | | | |
| Address: | | | Grade |
| Are you in school | Yes | | No |
| Graduated or G. E. D. | Yes | | No |
| College: Yes\_\_\_\_\_\_\_\_\_ No\_\_\_\_\_\_\_\_\_\_\_ | Year | | Where |
|  | | | |
| Parent or Guardian \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_ \_\_ Emergency Contact Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
|  | | | |
| Address: | | |  |
| City: | State: | | ZIP Code: |
|  | | | |
|  | | | |
| Contact phone number where you always be reached | | | |
| Landline | Cell | | Alternate |
| Experience | | | |
| Have you performed professionally? Yes\_\_\_\_\_\_\_\_\_\_\_\_\_\_ No\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
| Who with \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | How long? |
| Phone: | Phone: | | Fax: |
| City: | State: | | ZIP Code: |
| Position: | Under Contract? | | With Who |
| Skills | | | |
| List all your skills |  | |  |
|  |  | |  |
|  |  | |  |
|  | | | |
| What program are you applying | | Summer Camp ( ) | |
| Singing | | School Closing/School Breaks ( ) | |
| Waiver | | | |
| \*I will not be compensated for use of any picture, videos, or other exposures, and I grant America RAVES and its affiliates the right to publish my likeness, voice and all pictures for any purposes they deem necessary for my advancement and benefit while In programs. I hold America RAVES, it affiliates, sponsors, collaborators and partners harmless against accidents, mishaps and death, by my (child’s)negligence or willful defiance of rules of safety over applicable insurance policy limits. | | | |
|  | | |  |
| \*Waiver: By signing, you agree to all the terms of your child’s participation. Children 16 years old must have parental permission. See above  Parent or Guardian \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | |  |