



PO Box 9
 Hyde Park, VT 05655
 802-888-4507 • www.LCPlayers.com

LCP 2009 Children's Theater Workshop Junior Directorship Application

Name of Child:

Age:

Name of Parent/Guardian:

Address:

Phone (day):

Phone (evening):

Emergency Contact information:

E-mail:

Theater Experience: Please list any plays or musicals you have been involved in and the role you had. Be sure to include any shows in which you worked off stage as well as on.

Play/Musical	Role / part you played in the production

What are the best days and time to contact you? Please check all that apply and list and specific times.

<input type="checkbox"/>	Monday AM	<input type="checkbox"/>	Monday PM
<input type="checkbox"/>	Tuesday AM	<input type="checkbox"/>	Tuesday PM
<input type="checkbox"/>	Wednesday AM	<input type="checkbox"/>	Wednesday PM
<input type="checkbox"/>	Thursday AM	<input type="checkbox"/>	Thursday PM
<input type="checkbox"/>	Friday AM	<input type="checkbox"/>	Friday PM
<input type="checkbox"/>	Saturday AM	<input type="checkbox"/>	Saturday PM
<input type="checkbox"/>	Sunday AM	<input type="checkbox"/>	Sunday PM

Mail this form with your payment to:
 [Application deadline is JUNE 30]

Children's Theater Workshop
 Lamoille County Players
 PO Box 9
 Hyde Park, VT 05655