



TEXAS THESPIANS

STATE FESTIVAL

San Antonio

Nov. 10 - 13, 2023

Henry B. Gonzalez Convention Center

Grapevine

Nov. 15 - 18, 2023

Gaylord Texan Resort

Registration Packet

Student/Parent Information Packet Checklist:

- Troupe Responsibility Form (Director Only)
- Complete Student Registration Worksheet (**You Keep**)
- Read and understand:
 - Festival Rules
 - Code of Conduct
 - Social Media Policy
- Complete Consent and Acceptance Form (Every Attendee)
- Return with payment to your director
by deadline below

Packet Due by _____

Payment Due by _____

Texas Thespians Troupe Responsibility Form

Please neatly print or type (in a pdf editor) your responses in the form below and print out filled form. Get the needed signatures then take a picture of the form. You will submit the form while you complete your registration.

School Name _____

Troupe Number _____

Troupe Director Agreement

You are required to read the following to your group and complete the above signature page indicating that your group is aware of all rules.

As a Director of a Texas Thespian Troupe,

- I have read, understand, and agree to adhere to the behavior, security, social media, and solicitation policies and procedures outlined for the Texas Thespian Festival which is posted at www.texasthespians.org.
- I understand that **I am always on duty monitoring student delegate behavior** and that I have the **responsibility to address behavior issues** with any student delegate whose behavior warrants it.
- I understand that **my students are NOT allowed to loiter** in shared spaces and that their badges will be pulled if they are not involved in a show, a workshop, or an event.
- I understand that **I am REQUIRED to participate in a Festival competition position** and that if I do not fulfill my responsibility, my Professional Development Hour Certificate will be withheld and a judging fee will be added to my registration.
- I further understand that if I do not fulfill my Festival competition duties, my principal will receive a letter stating that I was negligent of my responsibility.
- I agree to file an incident report at the registration desk when necessary.
- I have educated my students and chaperones on these policies and procedures.
- I recognize the importance of quality educational theatre and that the Texas Thespian State Festival showcases quality theatre. I understand that the theatrical literature performed at the State Festival is as varied and diverse as the schools and communities from across Texas presenting it.
- I have read and discussed the hotel rules and code of conduct with my Troupe members, their parents, and my administration, and I/we promise to abide by them.
- I will be responsible for any member of my group breaking any rules, and I understand that I will be personally responsible for making sure all members of my group follow every one of these rules.

Director's Name _____

Troupe Director's Signature _____ Date _____

Campus Administrator Agreement

You are required to read the following to your group and complete the above signature page indicating that your group is aware of all rules.

As an administrator,

- I agree that all fees will be paid prior to the beginning of the Texas Thespian State Festival.
- I understand that our Thespians will be traveling to & participating in the Texas Thespian State Festival.
- I understand that at this festival there will be performances of a great variety and diversity of theatrical literature, which represent all levels of educational theatre in the state of Texas.
- I realize that the above-named Thespian Director is taking their troupe to the State Festival to gain a broader and greater appreciation of live theatre and will use this as an educational experience for the betterment of our students.
- I understand that the Director is REQUIRED to fulfill Festival competition duties and that if they do not fulfill their responsibility, Professional Development Hours Certificates will be withheld and a judge fee will be applied to their balance.

Administrator Name & Title _____

Administrator Email _____

Administrator Phone # _____

Administrator's Signature _____ Date _____

PRINT AND SIGN - UPLOAD SIGNED DOCUMENT WHEN YOU REGISTER FOR THE EVENT ONLINE

Thespian Festival Registration Worksheet

Return to your Troupe Director who will use this sheet to register you online. DO NOT MAIL THESE TO TEXAS THESPIANS.

Festival Attendees/Delegates- Fill out and return to your director by _____

Director's Name _____ Troupe # _____

Student Name _____ Cell # _____

Email _____ Grade Level _____

Shirt Size AS AM AL XL XXL XXXL **Seniors Only:** Opt in to Job Fair ___ YES ___ NO

Special Requests/Needs? _____

Parent Name _____ Cell # _____

Medicines to be dispensed while on the trip? ___ YES ___ NO Wheelchair Accessible ___ YES ___ NO

COMPETITIONS & ADDITIONAL REGISTRATION

National Qualifying Events

Schools may enter 15 National Performance and Technical I.E Events - National Short Film and Playwriting are unlimited and are NOT included in the 15 allowed. Students may **not** be cross entered in more than ONE National I.E. Event.

- | | | | |
|--|---|---|---|
| <input type="checkbox"/> Monologue- \$15.00 | <input type="checkbox"/> Solo MT Dance- \$15.00 | <input type="checkbox"/> Makeup/Hair Design- \$15.00 | <input type="checkbox"/> Stage Management- \$15.00 |
| <input type="checkbox"/> Duet Acting - \$15.00 per person | <input type="checkbox"/> Duet MT Dance- \$15.00 per person | <input type="checkbox"/> Playwriting- \$15.00 | <input type="checkbox"/> Theatre Marketing- \$15.00 |
| <input type="checkbox"/> Group Acting - \$15.00 per person | <input type="checkbox"/> Group MT Dance- \$15.00 per person | <input type="checkbox"/> Prop Design - \$15.00 | |
| <input type="checkbox"/> Solo Musical- \$15.00 | <input type="checkbox"/> Costume Construction- \$15.00 | <input type="checkbox"/> Scenic Design- \$15.00 | |
| <input type="checkbox"/> Duet Musical- \$15.00 per person | <input type="checkbox"/> Costume Design- \$15.00 | <input type="checkbox"/> Short Film- \$15.00 per person | |
| <input type="checkbox"/> Group Musical- \$15.00 per person | <input type="checkbox"/> Lighting Design- \$15.00 | <input type="checkbox"/> Sound Design- \$15.00 | |

Texas Events

Students may participate in National and Texas Events. See below for troupe entry limits.

Design Challenges (limit 1 entry per category)

- Team Hair/Makeup Design Challenge (team of 4) - \$15.00 per person
- Team Costume Design Challenge (team of 4) - \$15.00 per person
- Team Mask Design Challenge (team of 4) - \$15.00 per person
- Team Set Design Challenge (team of 4) - \$15.00 per person
- Team Tech Challenge (team of 5-7) - \$15.00 per person
- Improv Challenge (team of 4-6) - \$15.00 per person
- Dramatic Design (team of 4) - \$15.00 per group (limit 4 entries per school)
- Audio Design Challenge - \$15.00 per person

Lip Sync Competition

- Solo- \$15.00
- Duet- \$15.00 per person
- Group- \$15.00 per person

College Auditions & Scholarships

Unlimited Auditioners for JUNIORS AND SENIORS ONLY

- College Audition- \$25.00
- Scholarship Audition- \$25.00

Leadership Candidates

(limit 1 candidate per school per category)

- TTAN Student Ambassadors- \$25.00
- STO Candidate- \$25.00
- Honor Crew Candidate- \$25.00

NextGen Works

- Musicalworks- \$15.00
- DemocracyWorks Essay- \$15.00

PAYMENT INFORMATION

Festival Fees- Workshops & shows included (**\$150 for San Antonio & \$175 for Grapevine**) \$ _____

Competition and Additional Registration Fees- Total of any item(s) checked above \$ _____

Travel Expenses - Each troupe will have a different amount - Troupe directors fill this in. \$ _____

TOTAL DUE \$ _____

FOR DIRECTOR USE

Name on Check _____ Check # _____ Amount \$ _____

Cash Payment Amount \$ _____ Payment Date _____

Medical/Photo/Video Consent Form



**TEXAS
THESPIANS™**

AN EDUCATIONAL THEATRE
ASSOCIATION AFFILIATE

TEXAS THESPIANS, an affiliate chapter of the Educational Theatre Associate, requires that this form be completed for each delegate (students and adults) attending the TEXAS THESPIANS EVENT.

- If a delegate is a minor (under 18), a parent or legal guardian must complete this form
- The delegate (and family) is responsible for any fees incurred from a medical emergency
- If you substitute a delegate, you must supply a new completed health form
- Type or print legibly
- Enter name exactly as it appears on registration form

Delegate Information

Troupe # _____ Name of School _____

Director's Name _____ Cell # _____

Student Name (first and last) _____

Gender _____ Birthdate _____ Cell # _____

Home Address _____

City _____ State _____ Zip Code _____

Parent/Guardian (first and last) _____

Cell # _____ Additional Emergency # _____

I. RELEASE

The undersigned hereby releases and agrees to indemnify, save, and hold harmless the **TEXAS THESPIANS**, the International Thespians Society, the Educational Theatre Association, and all respective officers, employees, agents, and representatives of the aforementioned entities (each an "Organizer" and collectively the "Organizers") from and against any and all claims, demands, causes of actions, losses, liabilities, judgments, damages, costs and expenses (including reasonable attorneys' fees) resulting from the Delegate listed above participating in the **TEXAS THESPIANS STATE FESTIVAL, JUNIOR THESPIAN FESTIVAL, TROUPE DAY, and EDUCATOR CONFERENCE**. The undersigned shall give each Organizer prompt written notice of any claim or facts or circumstances that might give rise to any claim for indemnification. The undersigned further agrees to be responsible for the Delegate while traveling to and from **TEXAS THESPIAN EVENTS**, including any expenses incurred by the Delegate, caused by the Delegate, and/or any personal injuries that may occur to the Delegate. The undersigned authorizes the Delegate to be released to the Troupe Director or Chaperone listed on this form.

II. RULES AND REGULATIONS

The undersigned agrees that the Delegate shall abide by the **TEXAS THESPIANS** security rules and regulations (as described in detail at www.texasthespians.org). The undersigned understands that, if the Delegate violates any of the **TEXAS THESPIANS EVENTS** security rules and regulations **the Delegate may be returned home**, and the undersigned (or other parents and/or legal guardians) may be financially responsible for all necessary costs incurred while sending Delegate home. The undersigned also understands that TEXAS THESPIANS will follow its posted refund policy for all events.

III. PHOTO/VIDEO RELEASE

The undersigned irrevocably consent to being photographed or being recorded by means of video or audio tape recording by the Organizers, or a designated representative of the Organizers. These photographs and/or recordings can be used, without compensation to the undersigned and/or the Delegate, in any public display, publication or media, or website, or in any manner or form, and at any time by the Organizers in promotion of the mission to promote the theatrical arts and have theatre arts recognized in all phases of education. The undersigned releases the Organizers, and their employees, agents, representatives, associates, Board of Directors members, and consultants from any liability in connection with the use of such photographic, video, and/or materials.

IV. SOCIAL MEDIA & SOLICITATION POLICY

Social Media: Delegates may not use social media sites to publish disparaging or harassing remarks about Texas Thespians members. Delegates who choose to post editorial content to websites or other forms of online media must ensure that their submission does not reflect poorly upon Texas Thespians. Consequences for actions deemed inappropriate: 1) Remove or edit comments at any time, whether or not they violate this Policy. 2) Ban future posts from people who repeatedly violate this Policy. We may affect such bans by refusing posts from specific email addresses or IP addresses, or through other means as necessary. 3) Disciplinary actions that are decided on by the Texas Thespians Board of Directors. 4) Removal from Festival. Solicitation: Selling, soliciting, or fundraising of any kind is strictly prohibited. Delegates will be removed from the Festival if found violating this policy.

V. AUTHORIZATION

I consent to the use of disclosure of protected health information by the closest medical facility for the purpose of analyzing, diagnosing, and providing treatment to the above-stated delegate, obtaining payment for health care services rendered or to be rendered, or conducting health care operations. A copy of this consent is as valid as the original. I authorize my insurance benefits to be paid directly to the closest medical facility. I assume full responsibility for and agree to pay for all services rendered or to be rendered. I understand I have a right to receive a copy of this consent upon request, and to revoke this consent in writing at any time except to the extent that the closest medical facility has taken action in reliance on this consent. This authorization is valid one year from the date signed or through the term of coverage of the policy, and during the required period to process the claims.

VI. COVID PROTOCOLS

All Center for Disease Control (CDC) policies will be followed. By attending Texas Thespians events, the Delegate/Delegate's parent/s and/or guardian/s agree and acknowledge the contagious nature of COVID-19 and its variants and voluntarily assume the risk that they/you may be exposed to or infected by COVID-19.

The Delegate or the Delegate's parent and/or legal guardian has read, understands, and agrees to be bound by the above provisions, as evidenced by their signature below:

Signature of Delegate's parent and/or legal guardian

Signature of Delegate

Date

Date



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Adult Delegate

Medical/Photo/Video Consent Form

TEXAS THESPIANS, an affiliate chapter of the Educational Theatre Associate, requires that this form be completed for each Delegate.

- **Delegate** is defined as anyone who is attending a Texas Thespians event.
- The Delegate is responsible for any fees incurred from a medical emergency
- Type or print legibly
- Enter name exactly as it appears on registration form

Delegate/Attendee Information

Name of Company, School, or University _____

Delegates Name _____ Cell # _____

Gender _____ Birthdate _____ Work # _____

Home Address _____

City _____ State _____ Zip Code _____

Emergency Contact Name _____ Emergency Contact # _____

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II. RULES AND REGULATIONS

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VI. COVID PROTOCOLS

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The Delegate has read, understands, and agrees to be bound by the above provisions, as evidenced by their signature below:

Delegate's Name - Typed _____

Signature of Delegate _____

Date _____