



PARENTAL PERMISSION FORM

Name: _____

Date of Birth: _____ Age: _____

Parent Contact Name: _____

Parent Contact Phone Number: _____

I hereby give permission for _____ to perform in the Milton Keynes Amateur Operatic Society production of 'The Wizard of Oz the Pantomime' and will ensure that he/she is available for all performances as listed below:

Day	Date	Time	Notes
Monday	11 th December 2017	All day	Get in (Crew Only)
Tuesday	12 th December 2017	All day	Get in (Crew Only)
Wednesday	13 th December 2017	All day	Get in & Tech (6pm)
Thursday	14 th December 2017	7.00pm	Dress 1
Friday	15 th December 2017	7.00pm	Dress 2
Saturday	16 th December 2017	1.15pm & 6.15pm	2 shows
Sunday	17 th December 2017	1.15pm & 6.15pm	2 shows
Wednesday	20 th December 2017	7.15pm	1 show
Thursday	21 st December 2017	7.15pm	1 show
Friday	22 nd December 2017	7.15pm	1 show
Saturday	23 rd December 2017	1.15pm & 6.15pm	2 shows
Wednesday	27 th December 2017	7.15pm	1 show
Thursday	28 th December 2017	7.15pm	1 show
Friday	29 th December 2017	7.15pm	1 show
Saturday	30 th December 2017	1.15pm & 6.15pm	2 shows
Sunday	31 st December 2017	3.15pm	1 show
Monday	1 st January 2018	1.15pm	1 show & Get out
Total	16 performances (10 evenings & 6 matinees).		

I will ensure that he/she attends all rehearsals and will inform the Director/Choreographer in advance of any rehearsals which he/she is unable to attend. Dates already known in advance are listed overleaf.

I hereby give permission for my child (named above) to take part in publicity events, appear in publicity photographs and appear in a video recording of the production and to take part in rehearsals and be chaperoned during the production week in line with the Society's Child Protection Policy.

SIGNED: _____

DATE: _____

PRINT NAME: _____

RELATIONSHIP: _____