



WALLACE STATE HANCEVILLE

YOUNG ARTISTS CONSERVATORY INFORMATION AND APPLICATION

Overview: Wallace State Community College is currently accepting applications for the 2010 Young Artists Conservatory scheduled for June 7-11, 2010. The Conservatory is open to rising 6th – 8th grade students. Participants will spend the week rehearsing songs, scenes, orchestral music, and building scenery for the Conservatory's production of Disney's "Aladdin Kids." The week will culminate in a final performance at 6:00 p.m. on Friday, June 11, 2010.

Application: Students may participate as singers/ actors, artists, or instrumentalists. Participation is limited to the first 50 completed applications and applications will be accepted until Wednesday, May 26th at 5:00 p.m. (Mailed applications must be received by this date.)

Auditions/Participation: The Conservatory will begin with auditions on Monday, June 7th at 9:00 a.m. Participants will spend each day at Wallace State from 8:30 a.m. – 3:00 p.m. with snacks and lunch provided. The Wallace State Arts faculty will provide all instruction and will supervise the participants at all times. Wallace State performing arts students will serve as Conservatory Counselors and assist the faculty with all activities. The Conservatory will be held in the Burrow Center for the Fine and Performing Arts and in the Betty Leeth Haynes Theatre.

Fees: The Conservatory fee will be \$100 per student. This fee covers the licensing fee for the production, t-shirt, snacks and meals. Participants will wear their Conservatory t-shirts for the performance. Checks should be made payable to: The Wallace State Future Foundation.

Additional Information: Should you have questions regarding the Conservatory, please contact: Tiffany Richter at 256.352.8034 or Lauren Cantrell at 256.352.8422.

*Mail Completed Applications and payment to:
Wallace State -Hanceville • Attn: Suzanne Harbin • PO Box 2000 •Hanceville, Alabama • 35077*



WALLACE STATE

HANCEVILLE

| Young Artists Conservatory | | | | | | | |
|--|--|--|--|--|-----------------------------------|-----------------|----------|
| Name (First): | | | (Middle): | | | (Last): | |
| Mailing Address (Str/PO Box): | | | | | | | |
| City: | | | State: | | Zip: | Hm Ph: () | |
| Email address: | | | | | | Cell Ph: () | |
| School where currently enrolled: | | | | | | | |
| Grade (as of Fall 2010): | | | T-Shirt Size: <small>Adult sizes only</small> | | Date of Birth: ____ / ____ / ____ | | |
| Area of Interest for Institute: (Please list 1st and 2nd choice by placing a 1 or 2 in the box below) | | | | | | | |
| Actor/Actress | | | Vocal | | | Art | Musician |

LIABILITY RELEASE

This release will remain in effect throughout the duration of the undersigned student's participation in any/all **Young Artists Conservatory** activities offered by Wallace State Community College, and covers any/all on/off campus events, and during any/all travel incident to and part of any/all activities in which the participant may participate as part of the Arts Institute.

STUDENT

I, _____ [Print Student Name], the undersigned party, am a participant in the **Young Artists Conservatory** hosted by Wallace State Community College, and as such have voluntarily chosen to participate in activities sponsored by the Colleges and associate partner organizations/individuals, and described below. This release shall be binding upon my assigns, heirs, next of kin, executors and/or administrators of my estate.

Student Signature

_____/_____/2010
Date Signed

PARENT(S)/LEGAL GUARDIAN(S)

I(we) hereby release and hold harmless Wallace State Community College and any/all persons volunteering services to, employed by, and/or contracted by the aforementioned parties, as well as any other agent or representative of any/all parties, from any liability, claims, demands, actions, and causes of action whatsoever, arising from or related to any loss, damage, or injury to my(our) son/daughter or property thereof during Arts Institute activities/events, including transportation to/from activity sites, and upon the sites of the activities as described and put forth in this document, and as authorized by my(our) signature(s) below.

Parent/Legal Guardian [Print]

Signature

_____/_____/2010
Date Signed

