

Totowa Borough Public Schools

Washington Park School

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Patricia Capitelli

Chief School Administrator

Michael O'Brien

Principal

THE LION KING PERMISSION FORM

March 2018

Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
			1	2	3
5 <u>Songs & Dances</u> <u>Run Through</u> Full Ensemble 3:30-5:00	6 <u>Speaking Parts</u> <u>Run Through</u> Main Cast 3:30-5:00	7 <u>Songs & Dances</u> <u>Run Through</u> Full Ensemble 3:30-5:00	8 <u>Full Run Through</u> ALL CAST MEMBERS 3:30-5:00	9	10 TECH REHEARSAL ALL CAST AND STAGE CREW MEMBERS 9:00AM-1:00PM
12 <u>Stage Rehearsal</u> Full Ensemble & Stage Crew 3:30-5:00	13 <u>Stage Rehearsal</u> Full Ensemble & Stage Crew 3:30-5:00	14 <u>Stage Rehearsal</u> Full Ensemble & Stage Crew 3:30-5:00	15 <u>Full Run Through</u> ALL CAST AND STAGE CREW MEMBERS 3:30-5:00	16	17 DRESS REHEARSAL ALL CAST AND STAGE CREW MEMBERS 9:00AM-1:30PM
19 <u>Full Run Through</u> ALL CAST AND STAGE CREW MEMBERS 3:30-5:00	20 <u>Full Run Through</u> ALL CAST AND STAGE CREW MEMBERS 3:30-5:00	21 MATINEE PERFORMANCE!! 1:30PM	22 PERFORMANCE TIME!! Main Cast Make-Up: 5:30PM Hyenas & Prideland Animals: 6PM Show: 7PM	23 PERFORMANCE TIME!! Main Cast Make-Up: 5:30PM Hyenas & Prideland Animals: 6PM Show: 7PM	24 PERFORMANCE TIME!! Main Cast Make-Up: 5:30PM Hyenas & Prideland Animals: 6PM Show: 7PM
26 SCHOOL PERFORMANCE! 9:30AM	27	28	29	30	31

THE LION KING REHEARSAL AND PERFORMANCE PERMISSION FORM

I give permission for my child, _____, to participate in Spring Musical rehearsals and performances from March 5, 2018 to March 24, 2018. I hereby authorize the Totowa School District and its faculty members in charge of my child to obtain all necessary medical care and further authorize any licensed physician and/or medical personnel to render all necessary medical treatment. I understand and agree to the rehearsal and performance expectations/schedule. **RETURN THIS PERMISSION FORM BY MARCH 2ND.**

My child's means of transportation on the day of rehearsal is as follows:

My child will be a walker: _____

My child will be transported by: _____

Parent/Guardian (print name)

Parent/Guardian Signature

Telephone number where we may contact you on your child's rehearsal dates