


Authorized Signature



Beauty and the Beast

51st SUMMER THEATRE WORKSHOP2024

-PRESENTED BY-

MATAWAN-ABERDEEN REGIONAL SCHOOL DISTRICT

Dates: June 24th – July 28th, 2024

Time: 8:30am – 12pm, Monday – Thursday

Show Dates/Times: July 26th and July 27th at 7pm and July 28th at 2pm

Show Location: Matawan-Aberdeen Middle School

Requirements: 1. Eligible students have completed 3rd grade – 12th grade

(A Group – Completion of 3rd grade)

(B Group & Crew – Completion of 6th grade)

2. Commitment to participate in the final dress rehearsal week and performances.

(If you are planning a vacation during this final week of STW you must speak with the Director, Gerard Wells to see if you are eligible. You can email him at STW@marsd.org)

****Fee:** \$475 per resident student \$575 for non-resident student

Format: Week 1 – Vocal and Dance Auditions. Workshops in dance, singing and drama.

Crew will focus on set design/construction.

Week 2-4 –Continued workshops in dance, singing and drama.

Crew will continue design/construction projects.

Week 5 – Show Week! Dress rehearsals and Performances.

THERE WILL BE A LIMIT TO THE FIRST 10 CREW APPLICANTS. A waiting list will be kept. Residents of the MARSD community will be given priority over non-residents. Walk-in registrations are welcome.

COVID-19: In the efforts to keep everyone safe, we will be following the rules set in place by the school district

****The fee goes toward covering the costs associated with implementing the program.****

Forms with payment should be mailed to Mrs. Gina Hynes @ Matawan-Aberdeen Middle School by Friday, 6/21/24. Mailing address can be found on the form. If you miss the due date, **walk-ins are accepted**. Checks and money orders should be made payable to MARSD SUMMER THEATRE WORKSHOP.





SUMMER THEATRE WORKSHOP 2024

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MATAWAN-ABERDEEN REGIONAL SCHOOL DISTRICT

CAST/CREW NAME: _____

T-SHIRT SIZE (ADULT SIZES): X-SMALL SMALL MEDIUM LARGE X-LARGE 2X-LARGE

PARENT/GUARDIAN NAME: _____

FULL ADDRESS: _____

*PARENT/GUARDIAN CELL PHONE NO: _____

*PARENT/GUARDIAN EMAIL _____

GRADE /SCHOOL ENTERING IN SEPTEMBER 2024: 4th 5th 6th 7th 8th 9th 10th 11th 12th

INTERESTED IN BEING (CHECK ONE) PERFORMER: ____ PART OF THE CREW(grades 7-12): ____

*** Parent/Guardian must be reachable during workshop hours at the telephone numbers listed above. If you have any questions, please contact:**

Production Assistant, Mrs. Gina Hynes at - ghynes@marsd.org
Director-Producer, Mr. Gerard Wells at - gwells@marsd.org

Please make checks/money orders payable to **MARSD SUMMER THEATRE WORKSHOP** and return this form with the check or money order attached to:

MARSD Summer Theatre Workshop
Matawan-Aberdeen Middle School
469 Matawan Ave.
Cliffwood, NJ 07721
Attn: Gerard Wells or Gina Hynes

Resident student (\$475) _____ Non-Resident student (\$575) _____

Medical Condition: _____

Allergies /Medications _____

If your child has a severe medical condition that we should be aware of, please see the school nurse on the first day of the program. All necessary medications must be delivered at that time.

Parent/Guardian Signature

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