



# Children’s Theatre of Long Beach Consent and Release Form for a Child

CTLB After-School Theatre Program – Production of Finding Nemo  
February 2026 – June 2026

Please print in ink only

\_\_\_\_\_  
Child’s/Children’s Name(s) Age(s)

\_\_\_\_\_  
Child’s/Children’s School(s) Grade(s)

\_\_\_\_\_  
Home Address City State Zip

\_\_\_\_\_  
E-mail Address Home Phone #

\_\_\_\_\_  
Father/Guardian Name Cell/Work Phone #

\_\_\_\_\_  
Mother/Guardian Name Cell/Work Phone #

\_\_\_\_\_  
Additional Contact Other than Parent/Guardian Relationship Phone #

\_\_\_\_\_  
Doctor’s Name Phone # Insurance Co. Policy #

SHOW: 2026 Production of Finding Nemo - from February, 2026 – June , 2026 (“production”).

**PARTICIPATION CONSENT:** I, the undersigned, being the parent or legal guardian of the above named child/children (“child/ward”), do hereby consent to the participation of my child/ward in all the regularly scheduled activities of the production. Furthermore, I certify that my child/ward is physically fit to participate in all activities. I agree to notify the Children’s Theatre of Long Beach (“CTLB”) in the event of any health changes that would restrict my child/ward’s participation in any activity. I also understand that CTLB reserves the right to restrict my child/ward from any activity that they do not feel is within the physical capabilities of my child/ward.

**LIABILITY RELEASE:** I, the undersigned, do hereby release, forever discharge and agree to hold harmless CTLB, its directors, employees, volunteers and agents from any and all liability, claims or demands for accidental personal injury, sickness or death, as well as property damage and expenses, of any nature whatsoever which may be incurred by the undersigned and the above child/ward while involved in the production. Furthermore, I [and on behalf of my minor child/ward] hereby assume all risk of accidental personal injury, sickness, death, damage and expense as a result of participation in activities involved therein.

**MEDICAL TREATMENT CONSENT:** I, the undersigned, in the case of a medical emergency, hereby authorize CTLB to procure emergency medical services and authorize the providing of necessary medical services in the event of injury or illness. Furthermore, I understand that CTLB will not be responsible for medical expenses incurred, but I shall be liable and agree to pay all costs and expenses incurred in connection with such medical services rendered pursuant to this authorization. This authorization is to remain in effect through the entire production.

**MEDIA RELEASE:** I, the undersigned, do hereby grant permission for CTLB to photograph, video and/or voice record my child/ward during the production (or allow area news reporters to do the same) and to use such images and/or recordings for purposes of in-house CTLB use and/or for public promotion of CTLB including but not limited to brochures, websites, digital media, and newspapers.

Signature of \_\_\_\_\_ Date: \_\_\_\_\_  
Parent/Guardian



# Children’s Theatre of Long Beach Participation Behavior Agreement

Production of Finding Nemo  
February 2026 – June 2026

Please print in ink only

The following behavior guidelines have been established to create a safe, enjoyable, and productive learning environment for all participants in the CTLB After-School Theatre Program (“Program”):

## Student Responsibilities

- 1) Listen and follow instructions;
- 2) Keep hands and feet to yourself;
- 3) Be considerate and respectful of others and their things, including the facilities in use;
- 4) No foul or inappropriate language or speech;
- 5) No roughhousing, horse playing, or bullying;
- 6) Do not wander off, but stay with the group or in a designated area;
- 7) If going to the bathroom, never go alone, always take a buddy; and
- 8) Be ready for your turn.

Failure to keep these guidelines may result in one or more of the following consequences:

- A warning or timeout,
- A meeting with the Director,
- A call or notification to my parents/guardians,
- A loss or change of a role or part,
- A suspension or removal from the Program.

## Parent/Guardian Responsibilities

- 1) If I stay to observe a rehearsal, I will be supportive of the staff and willing to help if needed;
- 2) I will pick up my child/ward promptly at the end of rehearsals at the designated location;
- 3) I will notify the Program staff if other transportation arrangements have been made for pick up;
- 4) I will notify the Program staff if my child/ward will be absent, late, or leave early from rehearsal;

If everyone does these things, it will make for a good learning environment. That is what teamwork is all about.

Print Student Name \_\_\_\_\_

I have read [or have had read to me] these guidelines and agree to abide by them and the consequences for failure to keep them.

Signature of Student \_\_\_\_\_ Date: \_\_\_\_\_

I acknowledge that I have read these guidelines and have discussed them with my child/ward; and that I will accept and support whatever consequences may be applied to my child/ward due to his/her failure to keep these guidelines at the sole determination and discretion of the Children’s Theatre of Long Beach.

Signature of Parent/Guardian \_\_\_\_\_ Date: \_\_\_\_\_