



Improv and Storytelling Showcase Application

Students work with senior instructor Tom Herman, using signature Piven theatre games and improvisation exercises to create improvised, ensemble-based stories. To highlight our season-long focus on sharing the voices and stories of our community, this year's Showcase program will also feature storytelling workshops with master storyteller Kevin D'Ambrosio. The program will culminate with Showcase students taking the stage to perform in the Third Annual Piven Improvisation Series, sharing both improvised ensemble stories and rehearsed individual stories with the wider community!

Once your application has been submitted, you may be asked to audition.

Program Dates*:

Rehearsals: February 27-March 20th, Mondays, 7pm-10pm

Performances: Friday, March 31st and Friday, April 7th

Call time: 6:30PM

Show time: 7:30PM

*Attendance at all rehearsals and performances is mandatory except by instructor permission

Cost for program: \$250

How to Apply:

Please submit this form no later than January 15th with the following:

- 1) Personal information form (on following page)
- 2) A resume or list of theatre experience (including any training or classes taken) and a headshot or photo showing your face
- 3) A completed registration form (and scholarship application if applicable)

Applications may be mailed or e-mailed to:

Piven Theatre Workshop

927 Noyes St

Evanston, IL 60201

Email: adelong@piventheatre.org



Personal Information

Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____

Home Phone: _____ Cell Phone: _____

Have you attended classes at the Workshop? Yes No

If yes, when? _____

If no, how did you hear about Piven? _____

Please list other acting schools and training centers you have attended:

I have reviewed the dates of this program and do not have any conflicts: Yes No

If you answered no, please list any conflict here: _____

All of the above information is true to the best of my knowledge
I have attached my resume and completed registration form to this application

Applicant Signature

Date



REGISTRATION FORM

STUDENT INFO

Student's Name: _____ Gender: M F

Address: _____

City/State/Zip: _____

Home phone: _____ Cell phone: _____

Primary E-mail: _____

How did you hear about us? _____

If student is under 18, please complete the following:

Primary Parent Name: _____

Parent E-mail: _____

Cell Phone: _____ Work Phone: _____

Parent Occupation: _____ Employer: _____

Secondary Parent Name: _____

Parent E-mail: _____

Cell Phone: _____ Work Phone: _____

Parent Occupation: _____ Employer: _____

Student E-mail: _____

Date of Birth: _____ Grade: _____

School: _____

CLASS INFO

Name of Class: _____

Day & Time: _____

Please check one:

Fall Spring Summer

Cost: \$ _____

Name of Class: _____

Day & Time: _____

Please check one:

Fall Spring Summer

Cost: \$ _____

REGISTER

BY MAIL/IN PERSON:
Piven Theatre Workshop
927 Noyes St., Suite 110
Evanston, IL 60201

BY PHONE: (847) 866-6597

BY EMAIL: info@piventheatre.org

PAYMENT INFORMATION

cash check visa mastercard discover amex

Credit card #: _____ Expir. date: _____

Name on the card: _____

Signature: _____

Tuition Paid: \$ _____

+ *Would you like to add a tax-deductible donation?*

Amount donated: \$ _____

TOTAL:

\$

Registrations will be processed in the order in which they are received. You will receive an e-mail confirmation as soon as your registration has been processed. The confirmation will also include any information pertinent to the classes in which you have registered. Checks should be made out to "Piven Theatre Workshop."

Thank you, and we look forward to welcoming you to Piven Theatre Workshop!

Registration not accepted by fax