



## High School Improv and Storytelling Showcase Application

Advanced students learn to use 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 alongside Performance Project and the Young People's Company (Piven's professional-level youth ensembles) to perform in the Third Annual Piven Improvisation Series, sharing both improvised ensemble stories and rehearsed individual stories with the wider community!

### **Program Dates\*:**

Rehearsals: Saturdays, February 25–March 18; 2:00–4:00pm

Final Storytelling Rehearsal: March 25; 2:00–5:00pm

Performances: Sundays, March 26–April 9

Call time: 1:30PM

Show time: 2:30PM

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

**Cost:** \$275

### **How to Apply:**

Please submit this form no later than January 15 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
- 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](mailto:adelong@piventheatre.org)



## Personal Information - Page 1

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Parent/Guardian's Name: \_\_\_\_\_

Email: \_\_\_\_\_ Work/Cell Phone: \_\_\_\_\_

Parent/Guardian's Name: \_\_\_\_\_

Email: \_\_\_\_\_ Work/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:

Current School: \_\_\_\_\_ Grade: \_\_\_\_\_

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                      Parent/Guardian 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](mailto: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**