



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 Piven's mission to celebrate each individual's unique voice, the Showcase program will also feature storytelling workshops with master storyteller Kevin D'Ambrosio. The program will culminate with students taking the stage alongside Performance Project and the Young People's Company (Piven's professional-level youth ensembles) to perform in Piven's Fourth Annual Story & Sketch Series, sharing both improvised ensemble stories and rehearsed individual stories with the wider community!

Program Dates*:

Rehearsals: Saturdays, September 16-October 28; 10am-12pm

Performances: Sundays, November 12 and 19

Call time: 1:30PM

Show time: 2:30PM

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

Cost: \$300

How to Apply:

Please submit this form by **September 4** with the following:

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

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

Applications may be mailed or e-mailed to:

Piven Theatre Workshop / 927 Noyes St #110 / Evanston, IL 60201

Email: adelong@piventheatre.org



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