

CONSENT & ACCEPTANCE FORM (2024-2025)

Nevada Thespians, an affiliate of the Educational Theatre Association, requires that this form be completed for each delegate (students and adults) attending Nevada Thespian Chapter events including, but not limited to: Leadership/Tech, Regional Festival, and State Festival. If a delegate is a minor (under 18), a parent or legal guardian must complete this form. Attendee must also carry a copy of this form in his/her/their name badge while attending the event. If you substitute a delegate, you must supply a new completed health form. Type or print legibly. Enter name exactly as it appears on registration form. Bring hard copies of this form prior to conference or fill out the Google Form Consent and Acceptance PRIOR to Conference.

DELEGATE INFORMATION

_____ Delegate's First Name		_____ Delegate's Last Name		_____ Gender	
_____ Thespian Troupe #		_____ Name of School		_____ Delegate's Birthdate	
_____ Home Address (Street, City, State, Zip)		_____ ()		_____ Cell Phone Number	
_____ Name of Parent/Guardian/Next of Kin		_____ ()		_____ Cell Phone Number	
_____ Name of Second Emergency Contact		_____ ()		_____ Cell Phone Number	
_____ Name of Troupe Director/Chaperone		_____ ()		_____ Cell Phone Number	

MEDICAL INFORMATION

Insurance Company: _____ Member Number: _____

Physician's Name: _____ Phone: () _____

Last Tetanus Shot: ____/____/____ Allergies: _____

Medicines/Special Medical Needs: _____

Special Dietary Needs: _____
