



2025 Summer Youth Workshop
SCHOLARSHIP APPLICATION & FINANCIAL ASSISTANCE FORM

Student Name: _____ Sibling(s): _____ phone #: _____

Mailing Address: _____

_____ Zip Code: _____

Name of Parent/Guardian: _____

Are you Employed? _____ Disabled? _____

Employer: _____

Employer address: _____

Employer Phone #: _____

Number of Household Members you are responsible for? _____

Number of Children (under 18) in your household? _____

Estimated annual income: _____

Do you currently receive either state or federal assistance? Yes: _____ No: _____

Briefly describe your child's creative interests: _____

How would enrollment in this workshop benefit your child? _____

By signing below, I affirm that the information given herein is truthful and accurate

Signature: _____

Date: _____

*****OFFICE USE ONLY*****

Total amount of Scholarship/Assistance: _____ Given by: _____

Student: _____

Date: _____



ROCKPORT LITTLE THEATRE
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tickets@rockportlittletheatre.com

2025 YOUTH THEATRE WORKSHOP Registration Form

Student Name: _____ Gender ____ Age: ____ Grade Level: ____
Address: _____ Birthdate _____
City: _____ State: _____ ZIP: _____
Phone #: _____ EMAIL: _____

Parent or Guardian Name: _____
Address: _____
City: _____ State: _____ ZIP: _____
Phone #: _____ EMAIL: _____

EMERGENCY CONTACT INFORMATION

Name: _____ Relation: _____
Phone #: _____ EMAIL: _____
Family Doctor: _____ Phone #: _____

Any Allergies / Necessary Medications? _____

Medical Concerns? _____

T-Shirt Size: Youth XS ____ S ____ M ____ L ____ XL ____ Adult S ____ M ____ L ____ XL ____

Acting Experience: _____

Music/Vocal Experience: _____

Dance Experience: _____

Technical Interests (Circle One) Lights Sound Set Design Painting
Costumes Makeup Props Stage Manager

Does your child have any specific goals for this workshop? _____

As a parent, do you have an interest in volunteering a portion of your time to this Workshop? Yes _____ No _____ Area of Interest: _____

Workshop fee \$175 per student, + \$75 per Sibling

Total = _____

Payment Type (circle one) Cash _____ Check # _____

CC#: _____ EXP ____ / ____ CVV _____ ZIP _____

Scholarship Applied: Yes / No

Parent/Guardian Signature _____ Date _____



Summer Youth Theatre Workshop
Course Syllabus 2025
Shrek, Jr.
WEEK ONE

Date:	Time	Course material

May 24 th , Saturday	10 a – 2 p	Registration – in person
May 31 st , Saturday	10 a – 2 p	Registration – in person
June 2 nd , Monday	8 a – noon	Read thru/learn song
June 3 rd , Tuesday	8 a – noon (Cindy)	Audition Module/Auditions
	6 p – 8 p W/PARENTS	Bios/Headshots/Parent info
		Cast list/Song Performance
June 4 th , Wednesday	8 a – 9 a (Cindy)	Blocking/stage directions
	9 a – noon	Rehearsal/measurements
June 5 th , Thursday	8 a – noon	Rehearsal/Blocking

WEEK TWO

Date:	Time	Course Material

June 9 th , Monday	8 a – 9 a	Carl Thomas – guest speaker
	9 a – noon	Rehearsal
June 10 th , Tuesday	8 a – 9 a – (George)	tech/lights/sound
	9 a – noon	Rehearsal
June 11 th , Wednesday	8 a – 9 a	Set/Props/costumes/makeup
	9 a – noon	Rehearsal
June 12 th , Thursday	8 a – noon	Rehearsal

June 14th, Saturday

10 a – 3 p

Build in (lunch provided)

WEEK THREE

Date:

Time:

Course Material:

June 16th, Monday

8 a – 9 a

Surprise special guest

9 a -noon

Rehearsal

June 17^h, Tuesday

8 a – 9 a

Games/ Music/Acting

9 a – noon

Rehearsal

June 18th, Wednesday

8 a – 9 a

Costume Parade

9 a – noon

Rehearsal

June 19th, Thursday

8am - noon

Rehearsal

June 21st, Saturday

10 a – 3 p

Build in/Lunch Provided

June 22nd, Sunday

10 a – 3 p

Build in/Adults/Lunch

WEEK FOUR

Date:

Time:

Course material:

June 23rd, Monday

8 am – noon

Tech/Dress rehearsal

June 24th, Tuesday

8 am – noon

Tech/Dress rehearsal

June 25th, Wednesday

3 pm call, 5 pm go

Full final dress/preview

June 26th, Thursday

5 pm call, 7 pm go

Performance (evening)

June 27th, Friday

5 pm call, 7 pm go

Performance (evening)

June 28th, Saturday

1 pm call, 3 pm go

Performance (matinee)

June 29th, Sunday

1 pm call, 3 pm go

Performance (matinee)