



*A Heart To Give*

**Merritt Island Presbyterian Church  
Performing Arts Ministry**

600 South Tropical Trail  
Merritt Island, FL 32952

[www.merrittislandpc.org](http://www.merrittislandpc.org) 321-452-5689

Mary Lou Tipton, Director of Performing Arts  
Pamela Poland, Faith Formation Ministries Associate  
Leslie Mitchell, Music Director

**One Purpose Productions Registration-Spring 2020**

Wednesdays: 3:30-6:00 p.m. Grades 7<sup>th</sup> & Up

	Youth's Name	School/Age/Grade	Allergies	Health Issues/Meds
1.				
2.				
3.				
4.				

**\*\*Youth under the age of 18 must have a parent or guardian signature to register\*\***

Parents/Guardians: \_\_\_\_\_

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

Email: \_\_\_\_\_ Phone (H): \_\_\_\_\_ (C): \_\_\_\_\_

Youth Email: \_\_\_\_\_ Youth Phone (C): \_\_\_\_\_

Youth Birthday: \_\_\_\_\_

Others who will be picking up your Youth:

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

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

Do we have permission to administer first aid? Y N

Any special considerations we should be aware of? \_\_\_\_\_

Where is your home church? \_\_\_\_\_

I'm interested in:

Stage Performance

Assisting with Sound & Lighting     Assisting with Music

Set Design and Props/Costuming

Back Stage Management

Extra-Curricular Activities: \_\_\_\_\_ Musical Instruments played: \_\_\_\_\_

Would you like to purchase a One Purpose T-shirt for \$10.00? Please indicate t-shirt size(s) \_\_\_\_\_

I understand that it is possible that my youth's picture may be used on the MIPC website or in publicity pictures. No names will be used.

**Statement of Commitment:** By signing below, I agree to have my youth attend the MIPC worship service on Sunday, March 29<sup>th</sup> at 10:00 a.m. to sing for our congregation as a preview for the show performance.

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Youth Signature: (18 and over) \_\_\_\_\_ Date: \_\_\_\_\_

Registration fee is \$40 each for the first two youth, \$20 for each additional youth.

Scholarships are available, upon request (please speak to Mary Lou Tipton or Pam Poland, if needed).

\*\*\*\*\*For Office Use Only\*\*\*\*\*

Amount Paid: \$ \_\_\_\_\_ Form of Payment: \_\_\_ Cash \_\_\_ Check # \_\_\_\_\_ Registered by: \_\_\_\_\_