

Parent Liaison Form

Thank you for volunteering with Footlights Community Theater. By filling out this form, you agree to chaperone all child actors and are responsible for:

1. Assuring the children do not leave the rehearsal space without a chaperone or parental guardian.
2. Disbanding any form of bullying or harassment.
3. Assuring the general safety of the children and seeing to their well being (such as noticing problems, answering questions, and assisting needs).
4. Preventing any structural damage performed by children and ensuring venue space is not left vandalized or littered.

X _____

Date: _____

Phone: _____

Print Name

Remaining Rehearsal Dates Available (Include Time Restrictions)
