



# PARTICIPATING INSTITUTION REGISTRATION FORM

62nd Annual Convention ♦ Atlanta, GA ♦ March 2-6, 2011

Deadline for registration is January 14. No refunds after January 28.

Institution Name: \_\_\_\_\_

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

Contact Person: \_\_\_\_\_ Position: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

By providing your mail and email addresses you are agreeing to receive our publications as well as information promoting our products or services. If you do not wish to receive, please check here:  I do not wish to receive promotional mailings.  I do not wish to receive promotional email.

Primary Onsite Rep\*: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

\* All onsite school representatives must register for the Convention separately using the Individual Registration Form or online.

**Institutional Membership** \$70 \$ \_\_\_\_\_

|                                                |                          |                  |    |       |
|------------------------------------------------|--------------------------|------------------|----|-------|
| <input type="checkbox"/> <b>Education Expo</b> |                          |                  |    |       |
| Standard (8' x 8')                             | Booth Premium (10' x 8') | Booth (10' x 8') |    |       |
| Postmarked 10/21/10 - 11/30/10                 | \$125                    | \$150            |    |       |
| Postmarked 12/01/10 - 12/20/10                 | \$200                    | \$225            | \$ | _____ |
| Postmarked 12/21/10 - 01/14/11                 | \$275                    | \$300            |    |       |

A separate deposit of \$50.00 is due with your reservation. You must provide a credit card number. If you must pay by check, please cut a separate check.

Visa or MasterCard: \_\_\_\_\_ Expiration: \_\_\_\_\_ / \_\_\_\_\_ Security Code: \_\_\_\_\_  
Your card will NOT be charged unless exhibit is removed before 1pm on Saturday, March 5, 2011.

**Undergraduate Auditions/Interviews** \$25 \$ \_\_\_\_\_  
 We will be auditioning actors  
 We will be reviewing design/tech portfolios

**Graduate Auditions/Interviews** \$25 \$ \_\_\_\_\_  
 We will be auditioning actors  
 We will be reviewing design/tech portfolios

**Scholarship/Endowment Contribution** \$ \_\_\_\_\_  
Support Education in Theatre: Contribute

**Total Amount Due** \$ \_\_\_\_\_

**As authorized by my institution, I agree that we will participate in the above selected activities.**

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
*PLEASE NOTE: Schools will not be allowed to participate without this signature.*

**PAYMENT OPTIONS**  MasterCard  Visa  Money Order Enclosed  Check Enclosed  
Money order # \_\_\_\_\_ Check # \_\_\_\_\_

Card Number: \_\_\_\_\_ Expiration: \_\_\_\_\_ / \_\_\_\_\_ Security Code: \_\_\_\_\_

Name on Card: \_\_\_\_\_ Signature: \_\_\_\_\_

SETC ♦ 1175 Revolution Mill Dr. Suite 14, Greensboro, NC, 27405 ♦ Phone 336-272-3645 ♦ Fax 336-272-8810 ♦ Email setc@setc.org ♦ www.setc.org

Office use only: DB: \_\_\_\_\_ / \_\_\_\_\_ QB: \_\_\_\_\_ / \_\_\_\_\_  
date initials date initials



# INDIVIDUAL REGISTRATION FORM – No refunds after 1/28/11\*

Copy as needed - one form per person.

Schools and Hiring Companies should NOT use this form for organizational activities.

SETC 2011  
Atlanta, GA

Name \_\_\_\_\_  
Last First MI

Home Address \_\_\_\_\_  
Street/PO Box Apt #

City State Zip Email

By providing your mail and email addresses you are agreeing to receive our publications as well as information promoting our products or services. If you do not wish to receive, please check here:  I do not wish to receive promotional mailings.  I do not wish to receive promotional email.

Contact Phone \_\_\_\_\_ Gender (M/F) \_\_\_\_\_ Ethnicity (Optional) \_\_\_\_\_

School/Theatre Affiliation \_\_\_\_\_

Division Choice (Number 1<sup>st</sup> & 2<sup>nd</sup> Choice) \_\_\_ Theatre for Youth \_\_\_ College/University \_\_\_ Community \_\_\_ Professional \_\_\_ Secondary School

Interest Area (Number 1<sup>st</sup> and 2<sup>nd</sup> Choice) \_\_\_ Administration/Management \_\_\_ Design/Technology \_\_\_ Directing/Acting \_\_\_ Film/Television  
\_\_\_ Musical Theatre \_\_\_ History/Criticism \_\_\_ Playwriting \_\_\_ Religion and Theatre \_\_\_ Stage Movement/Combat \_\_\_ Voice/Speech

Check here if Presenting a Program/Workshop  Title(s): \_\_\_\_\_

## Convention Registration – Includes Membership

| Postmarked by:             | 12/20/10 (Early Bird Discount) | 1/28/11 (Advance Registration) | Onsite Registration |
|----------------------------|--------------------------------|--------------------------------|---------------------|
| Individual:                | <input type="checkbox"/> \$200 | <input type="checkbox"/> \$230 | \$270               |
| Student:                   | <input type="checkbox"/> \$120 | <input type="checkbox"/> \$155 | \$195               |
| Senior Discount (65/over): | <input type="checkbox"/> \$135 | <input type="checkbox"/> \$160 | \$210               |
|                            |                                |                                | \$ _____            |

## Activities (check all that apply)

If you would like to apply for Auditions, Design/Tech Interviews, Job Contact Service (off-stage jobs), or Design Competition you cannot use this form. Please visit our website (www.setc.org) for Convention Registration and specific event application details.

- K-12 Institute, Wednesday 9am - 4pm, A pre-convention seminar (includes lunch).....\$65 \$ \_\_\_\_\_
- Friday Lunch, 1pm, Entertainment and prizes ( vegetarian) .....\$20 \$ \_\_\_\_\_
- Saturday Night Gala, *Live from Atlanta*  
Dinner, Awards, and Dance, 8pm ( vegetarian) .....\$30 \$ \_\_\_\_\_
- Richard Robichaux* Master Class: *Acting for Camera* (limited to 20 per session)  
Thursday  9-11 AM  1-3 PM  4-6 PM .....\$50 \$ \_\_\_\_\_
- Patsy Rodenburg* Master Class for Professionals, Thursday 4-5:20pm (limited to 50).....\$50 \$ \_\_\_\_\_
- Patsy Rodenburg* Master Class for Undergrad/Grad Students, Friday 1-2:20pm (limited to 50) .....\$30 \$ \_\_\_\_\_

## Convention ONLY – For Life Members or current members paid thru 6/30/11. (Please verify before sending.)

| Postmarked by:             | 12/20/10 (Early Bird Discount) | 1/28/11 (Advance Registration) | Onsite Registration |
|----------------------------|--------------------------------|--------------------------------|---------------------|
| Individual:                | <input type="checkbox"/> \$130 | <input type="checkbox"/> \$160 | \$200               |
| Senior Discount (65/over): | <input type="checkbox"/> \$ 85 | <input type="checkbox"/> \$110 | \$160               |
|                            |                                |                                | \$ _____            |

## Scholarship Contribution – Support Education in Theatre: Contribute and receive a Lanyard!

\$5  \$10  \$20  \$50  other amount \$ \_\_\_\_\_

Your contribution will help the student of today become the theatre professional of tomorrow!

SETC contributes over \$20,000 annually in scholarships to theatre students.

Total Amount Due \$ \_\_\_\_\_

PAYMENT OPTIONS  MasterCard  Visa  Money Order Enclosed  Check Enclosed  
Money order # \_\_\_\_\_ Check # \_\_\_\_\_

\*No Refunds after 1/28/11. All Refunds prior to 1/28/11 will be less a \$5 processing fee. Return Check fee \$30.

Card Number \_\_\_\_\_ Expiration \_\_\_\_/\_\_\_\_ Security Code \_\_\_\_\_

Name on Card \_\_\_\_\_ Signature \_\_\_\_\_



## PARTICIPATING INSTITUTION PROFILE

62nd Annual Convention ♦ Atlanta, GA ♦ March 2-6, 2011

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### INSTRUCTIONS:

- **DO NOT** fax this form
- This form will be copied exactly as submitted to SETC
- No attachments or enclosures will be accepted
- Please save and email the form
- Return by January 28

### Please Indicate Which Activities Your Institution Is Participating

- Undergraduate Acting Auditions
- Undergraduate Design/Tech Interviews
- Graduate Acting Auditions
- Graduate Design/Tech Interviews
- Education Expo

Institution Name: \_\_\_\_\_

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

Primary Contact Person: \_\_\_\_\_ Position: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_ Dates of Academic Year: \_\_\_\_\_ to \_\_\_\_\_

Onsite Representative(s): \_\_\_\_\_

Department Phone: \_\_\_\_\_

**List and Describe Degrees/Programs Offered:**

**Give Brief History of School and Department:**

**Describe Facilities:**

**Explain Scholarships or Assistantships Available:**