



INTERNATIONAL THESPIAN SOCIETY

HONORING STUDENT ACHIEVEMENT IN THEATRE

High School Thespian Troupe Activation Form 2018–2019

Type or print legibly in black ink.

School: School name

Address

City State/Prov.

Zip/Postal code Country

Phone Ext. Best time to call Fax

Preferred troupe email required (monitored regularly by troupe director)

If you have a **PROMO CODE**, enter it below thru 6/30/19 to save \$90.

First-time troupe charter

Reinstating a withdrawn troupe
Troupe no. (if known):

Not sure of prior affiliation status

Troupe director: Prefix Name: First Middle I. Last Suffix

Job title Troupe director's preferred first name Male Female

Address

City State/Prov. Zip/Postal code Country

Personal phone Home Cell Best time to call

Personal email required (used as log-in ID) Birthdate (required -- mm/dd/yyyy)

Principal: Prefix First Last Suffix

Principal email required

Payment and authorization. P.O. and credit card payments will be adjusted to reflect correct fees as needed unless we are instructed NOT to do so below. If adjustments are NOT authorized, processing will be delayed until complete payment is received.

ITS Troupe Activation Authorization (required)
By signing below, the troupe director and principal indicate their agreement to the terms of membership on page 2 of this application.

Troupe director Date

Principal Date

Annual troupe dues for 2018–2019 (8/1/18 - 7/31/19) = \$ 100.00

Troupe activation fee (charter or reinstatement) = \$ 100.00

Enter PROMO CODE to deduct \$90 = \$ _____

New student inductees _____ @ \$30.00 each = \$ _____

Optional rush service fee (\$45.00: box above) = \$ _____

Total amount enclosed = \$ _____

- Check or money order enclosed. Please submit only one check or money order per school.
- School purchase order document enclosed. P.O. number and administrator's signature required.
- Charge my: Visa MasterCard American Express

Student membership cards and certificates needed by
(This is NOT a guaranteed delivery date.)

INITIAL Do NOT adjust P.O. amount.

INITIAL Do NOT adjust credit card amount.

Name on card Signature

Credit card billing address

Account number Expiration date CID/Card code (Amex 4 digits; all others 3)

Terms of membership for ITS troupes. To be affiliated with the International Thespian Society (ITS), a division of the Educational Theatre Association (EdTA), a school's charter application must be successfully processed, annual troupe dues must be paid, and minimum membership requirements must be met. A school-based student organization, a Thespian troupe or Junior Thespian troupe, is created. The school administration appoints the troupe director who becomes the single, official representative of the school and troupe to EdTA. Troupe directors are subject only to the authority of the school's administration and the EdTA Board of Directors. The troupe director is a professional member of EdTA as long as the troupe maintains active status. All correspondence from EdTA will be sent to the troupe director's attention only. It is the troupe director's responsibility to forward all invoices and statements for processing as required by the school's payment policies and procedures. The troupe director must authorize all transactions, orders, rosters, and membership queries EdTA receives from the troupe and is responsible for keeping copies of all correspondences for the troupe record. **The school agrees to be legally and financially responsible for all troupe activity. By signing on page 1, the troupe director and principal indicate their agreement to these terms as well as those set forth in the EdTA Code of Regulations, Code of Professional Standards, policies, and the Thespian or Junior Thespian Troupe Handbook, which are available for review at schooltheatre.org.**

Student membership information. The troupe is required to have a minimum active member base of at least six students at the time of activation and by the end of each school year (7/31). Active Thespians already listed on the troupe roster of a reinstating troupe or transferring to a new troupe count toward this requirement. In general, any student who has participated in at least two productions for a total of 100 hours of work is eligible for International Thespian Society membership. If you do not already have at least six officially inducted Thespians attending your school, you will need to induct enough students now to reach that requirement. Please list your new inductees' names and contact information on the following pages along with their grades (9-12) for the current ITS school year, August 1 through July 31. Obtain correct spelling of name and current address information from all inductees to ensure they receive their *Dramatics* magazine subscriptions. Do not copy from school records. There will be a fee for replacement membership cards and certificates. Reporting gender is optional.

MAIL POLICY: A correct mailing address is required for induction. EdTA/ITS may share Thespian mailing information with colleges, universities, or other organizations that might be of interest to members. Thespians may opt out at any time by logging in to schooltheatre.org and updating their online member profiles.

EMAIL POLICY: A correct email address is required for induction. EdTA/ITS does not release Thespian email addresses to third-party vendors but may deliver carefully screened offers and information on behalf of selected schools and organizations. Thespians may opt out at any time by updating their online profiles.

BIRTHDATE POLICY: A correct birthdate and year is required for induction. Member birthdates are stored on secure servers and are for internal, EdTA/ITS use only. They are not released to outside individuals or organizations. The combination of name and birthdate creates a unique identifier to help avoid errors, reduce duplicate records, and distinguish alumni in the future.

EdTA/ITS reserves the right to change these policies.

Returning the completed application form.

For fastest turnaround, submit this form using one of the methods suggested below. Suggestions are based on the payment type you chose on page 1.

- **Credit card payment.** Submit form by fax to 513.421.7055. Do not send credit card information by email.
- **Official school purchase order.** Submit form along with a copy of the P.O. document as an email attachment to members@schooltheatre.org or by fax to 513.421.7055. The purchase order must include a P.O. number and administrator signature.
- **Check or money order.** (RUSH SERVICE unavailable) Submit form by mail to:

**Educational Theatre Association
PO Box 645084
Cincinnati, OH 45264-5084**

Please keep a copy of this completed form for your records and allow three weeks from date of receipt for processing for your non-rush application.

Fees are in effect August 1, 2018 to July 31, 2019 and are non-refundable. Once submitted, inductions cannot be canceled and are nontransferable.

Certificates, membership cards, parent stickers, and induction pins for all new members listed will be mailed to the troupe director once this form and all membership fees are processed at the National Office. *Dramatics* print subscriptions (one-year, bimonthly) will begin six to eight weeks after processing. By logging in to schooltheatre.org, inductees may access *Dramatics Digital* from induction through the year following high school graduation.

Your annual troupe dues support the operation of the International Thespian Society and help defray the cost of troupe director benefits, including subscriptions to *Dramatics* and *Teaching Theatre*, with a retail value of \$85. Please inform students that \$15.01 of each \$30.00 student membership fee is payment for a subscription to *Dramatics* magazine.

Troupe management information is available online at schooltheatre.org/troupehandbook.

Please print or type legibly. Black ink only. Genders are optional. *Emails and birthdates are required.* Copy and attach separate sheet(s) for additional names, if needed.

1. Name: First Middle I. Last Suffix
 Male Female Home address
City St./Pr. Zip or postal code
Email (required --used to access online benefits) Birthdate (required - mm/dd/yyyy)
Grade: 9 10 11 12 Graduation year I do not wish to receive scholarship, college, or other information by: Mail Email

2. Name: First Middle I. Last Suffix
 Male Female Home address
City St./Pr. Zip or postal code
Email (required --used to access online benefits) Birthdate (required - mm/dd/yyyy)
Grade: 9 10 11 12 Graduation year I do not wish to receive scholarship, college, or other information by: Mail Email

3. Name: First Middle I. Last Suffix
 Male Female Home address
City St./Pr. Zip or postal code
Email (required --used to access online benefits) Birthdate (required - mm/dd/yyyy)
Grade: 9 10 11 12 Graduation year I do not wish to receive scholarship, college, or other information by: Mail Email

4. Name: First Middle I. Last Suffix
 Male Female Home address
City St./Pr. Zip or postal code
Email (required --used to access online benefits) Birthdate (required - mm/dd/yyyy)
Grade: 9 10 11 12 Graduation year I do not wish to receive scholarship, college, or other information by: Mail Email

5. Name: First Middle I. Last Suffix
 Male Female Home address
City St./Pr. Zip or postal code
Email (required --used to access online benefits) Birthdate (required - mm/dd/yyyy)
Grade: 9 10 11 12 Graduation year I do not wish to receive scholarship, college, or other information by: Mail Email

6. Name: First Middle I. Last Suffix
 Male Female Home address
City St./Pr. Zip or postal code
Email (required --used to access online benefits) Birthdate (required - mm/dd/yyyy)
Grade: 9 10 11 12 Graduation year I do not wish to receive scholarship, college, or other information by: Mail Email

7. Name: First Middle I. Last Suffix
 Male Female Home address
City St./Pr. Zip or postal code
Email (required --used to access online benefits) Birthdate (required - mm/dd/yyyy)
Grade: 9 10 11 12 Graduation year I do not wish to receive scholarship, college, or other information by: Mail Email

8. Name: First Middle I. Last Suffix
 Male Female Home address
City St./Pr. Zip or postal code
Email (required --used to access online benefits) Birthdate (required - mm/dd/yyyy)
Grade: 9 10 11 12 Graduation year I do not wish to receive scholarship, college, or other information by: Mail Email

9. Name: First Middle I. Last Suffix
 Male Female Home address
City St./Pr. Zip or postal code
Email (required --used to access online benefits) Birthdate (required - mm/dd/yyyy)
Grade: 9 10 11 12 Graduation year I do not wish to receive scholarship, college, or other information by: Mail Email

10. Name: First Middle I. Last Suffix
 Male Female Home address
City St./Pr. Zip or postal code
Email (required --used to access online benefits) Birthdate (required - mm/dd/yyyy)
Grade: 9 10 11 12 Graduation year I do not wish to receive scholarship, college, or other information by: Mail Email