SHEA’S 2020 JUNIOR THEATER CELEBRATION APPLICATION

OVERVIEW

Shea’s Performing Arts Center and iTheatrics join forces to offer schools and arts organizations the opportunity to participate in Shea’s Junior Theater Celebration. All organizations and schools that produce a musical with upper elementary and middle school students in the greater Buffalo area are invited to apply. This free event is created and artistically supervised by iTheatrics, the premiere creative consultants in educational musical theater based in New York City, and offers students and teachers a chance to interact and learn with others who share their passion for musical theater in a professional environment.

THE PROGRAM

On Friday, June 5 and Saturday, June 6, 2020, selected schools and organizations will be invited to Shea’s 710 Theatre to celebrate outstanding student musical theater productions. During the Celebration, students from each program will perform one selection from their musical for a distinguished panel of theater professionals. These professionals will provide valuable feedback to the students about their ability to tell an engaging story, their performance skills, and their work as an ensemble. Additionally, students and teachers will both participate in interactive workshops that will provide further training and instill a deeper understanding of the art form.

COMMITMENT

Schools and organizations selected to participate in the program must:

- Be available from 9:00 AM – 4:00 PM on either Friday, June 5 or Saturday, June 6*
- Provide transportation for their participants to Shea’s 710 Theatre for the celebration
- Ensure lunches are provided for their students
- Provide chaperones for their students
- Rehearse and prepare one musical theater number, which must be performed to a recorded music file (i.e. mp3, m4a, wav, etc.) sent ahead of time.

*Program is the same on both days. Participants must choose only one day to participate.

HOW TO APPLY

Interested organizations and schools should complete the enclosed application and return it to Jen Mysliwy at jmysliwy@sheas.org or fax it to 716-847-1644.
SHEA’S JUNIOR THEATER CELEBRATION
2020 Application

Organization/School: ________________________________________________________________

Address: ________________________________________________________________________

City: ___________________________________ State: ___________ Zip Code: __________________

Day Phone: ____________________________ Cell Phone: ________________________________

Organization/School Website: _________________________________________________________

Primary Contact: _________________________________________________________________

Email Address: _________________________________________________________________

Alternate Email Address: ____________________________________________________________

Which day would you like to participate in the Celebration?  Friday, June 5 ☐ Saturday, June 6 ☐

Name of musical: _________________________________________________________________

Does your organization have the rights to perform this musical?  YES ☐ NO ☐

Artistic team names: ________________________________________________________________

Ages of student performers: _________________________________________________________

Approx. number of students who would attend the Celebration: ___________________________

Have you participated in the Celebration in the past?  YES ☐ NO ☐

If yes, what year(s)? ______________________________________________________________

Briefly describe your organization/school and how musical theater plays a role in it.
Why do you feel your organization/school should be selected to participate in the Celebration?

What do you hope your students will gain from participating in the Celebration?

What do you hope your artistic staff will gain from participating in the Celebration?

**ELECTRONIC SIGNATURE**
This electronic signature signifies I understand the project and accept the responsibility associated with it if our organization is selected to participate.

Primary Contact: _____________________________________________________________

Position: ________________________________________________________________

Signature: _______________________________________________________________

Questions may be directed to: jmysliwy@sheas.org or 716-829-1171.