Northmead
Creative and Performing Arts High School

END OF YEAR DRAMA PERFORMANCE SHOWCASE 2020

The 2020 End of Year Drama Performance Showcase will be on **Thursday 3/12/2020**. Following the recent COVID-19 laws, this show will have no audience and not be open to the public. However, this show will be recorded and available for purchase through **https://www.advantagevideoproductions.com.au** with details to follow.

A full day tech rehearsal day is on **Thursday 3/12/2020** prior to the performance where students will be able to rehearse their pieces in the hall. The show for recording will commence at **3pm** and conclude at approximately **5pm**. This year, the rehearsal will be staggered in groups.

Rehearsal and Performance Timetable

8:30 – 9.30	Drama Company
9.30 – 10.30	Year 8 CAPA Drama
10.30 – 11.30	Year 9 CAPA Drama
11.30 – 12.30	Year 10 CAPA Drama
12.30 – 1.30	Year 11 Drama
1.30 – 2.30	Year 7 CAPA Drama
2.30 – 3.00	- Break -
3.00 – 5.00	Show Performance

* Recess and Lunch Breaks will continue at the regular set times. Those groups rehearsing during these times will have their breaks after their rehearsal.

DRAMA REQUIREMENTS

For the rehearsal and performance all performers are to bring all costume essentials. Students must be responsible for all their costumes and essentials. Please note students must provide their own make-up and applications as there is **strictly no sharing of make-up and applications**. This includes the use of costumes and props.

Mr W Flanagan
Rel.Head Teacher CAPA

Ms N Vazquez
Principal

END OF YEAR DRAMA PERFORMANCE EVENING Permission Slip - Return by _Monday November 16th_

I give permission for (student name) .... to participate in the Drama Showcase rehearsal and performance event on **Thursday 3rd December**.

- **Students are required for rehearsal at their designated times and are also required to be a respectful audience member during other groups rehearsing. Student will also be required to be part of the audience during the show.**
- **I have read the dress requirements for the performance day.**

Conditions/Medications: ....

Parent Name: .... Signature: ....

Contact Telephone: .... Date: ....