



STUDENT NAME: _____

CONFLICT CALENDAR

Identify **ALL** activities (vacation, school, job, church, community) that will conflict with rehearsals for *The Wizard of Oz*. **All absences** must be listed on this conflict sheet at the time of the audition. This ensures that the cast selection process fairly considers each student's availability and commitment to the show. Potential rehearsal dates are listed below. If you are cast in the show, you will receive a more detailed schedule at the Parent Meeting.

JUNE 2019

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
						1 10a-1p Rehearsal
2	3 9a-1p Rehearsal	4 9a-1p Rehearsal	5 9a-1p Rehearsal	6 9a-1p Rehearsal	7	8 10a-1p Rehearsal
9	10 9a-1p Rehearsal	11 9a-1p Rehearsal	12 9a-1p Rehearsal	13 9a-1p Rehearsal	14	15
16	17 9a-1p Rehearsal	18 9a-1p Rehearsal	19 9a-1p Rehearsal	20 9a-1p Rehearsal	21	22
23	24 9a-1p Rehearsal	25 9a-1p Rehearsal	26 9a-1p Rehearsal	27 9a-1p Rehearsal	28	29

JULY-AUGUST 2019

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
	1 9a-1p Rehearsal	2 9a-1p Rehearsal	3 9a-1p Rehearsal	4	5	6
7	8 9a-1p Rehearsal	9 9a-1p Rehearsal	10 9a-1p Rehearsal	11 9a-1p Rehearsal	12 Special Event (Evening)	13
14 No Conflicts After This Date!	15 9a-1p Rehearsal	16 9a-1p Rehearsal	17 9a-1p Rehearsal	18 9a-1p & 6-9p Rehearsal	19 9a-1p Rehearsal	20
21 3-7p Rehearsal	22 5-9:30p Dress Rehearsal	23 5-9:30p Dress Rehearsal	24 5-9:30p Dress Rehearsal	25 5-9:30p Dress Rehearsal	26 7:00p PERFORMANCE	27 2:00p PERFORMANCE
28	29 9:30a-4p Backstage Pass (optional)	30 9:30a-4p Backstage Pass (optional)	31 9:30a-4p Backstage Pass (optional) 5-9:30p Dress Rehearsal	AUGUST 1 9:30a-4p Backstage Pass (optional) 7:00p PERFORMANCE	2 9:30a-4p Backstage Pass (optional) 7:00p PERFORMANCE	3 7:00p PERFORMANCE

I have marked all of my potential conflicts with **THE WIZARD OF OZ** rehearsals. I understand CYT's attendance policy, and the consequences associated with having conflicts (expected or unexpected) that are not listed here.

Student Signature: _____

Date: _____

Parent/Guardian Signature: _____

Date: _____