

Theatrical Permit Application

In accordance with *Code of Virginia* § 40.1-102

This application must be filed at least five days before the date of any performance to which it pertains. Please plan accordingly.

Name of Minor: _____		Date of Birth: _____ MM/DD/YYYY				
Street _____ City _____ State _____ Zip _____		Age: _____ years old				
Name of School Attending: _____		Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female				
Parent/ Guardian:	Mother _____	Street _____	City _____	State _____	Zip _____	Phone _____
	Father _____	Street _____	City _____	State _____	Zip _____	Phone _____
Name of Performance: _____						
Dates of Program: _____ to _____ MM/DD/YYYY MM/DD/YYYY			Production Time: _____ AM/PM to _____ AM/PM			
Specific Location of Production: _____ Location Name Street Address City State Zip <i>*If production is to occur at multiple locations, please include an attachment listing the physical address of each location.</i>						
Please provide a brief description of (1) the production, (2) the Minor's involvement, and (3) how the Minor's educational requirements will be fulfilled. If additional space is needed, please note so in this section and attach a separate sheet detailing the above information. _____ _____ _____						
<i>Note: Section 40.1-102 of the Code of Virginia requires that the production not be detrimental to the health or morals of the child and that the child's education not be neglected or hampered by his or her participation in such drama, play, performance, concert or entertainment.</i>						
Name of Production Company: _____						
Production Company Address: _____ Street Address City State Zip						
Name of Production Manager: _____						
Phone _____ Fax _____ Email _____						
Production Manager's Signature: _____						Date: _____
Person Responsible for Minor During Production: _____						
Phone _____ Email _____						
Person Responsible's Signature: _____						Date: _____
Name of Broadcaster: _____				Broadcast Dates: _____ to _____		
Potential for Syndication: <input type="checkbox"/> Yes <input type="checkbox"/> No				Projected Lifespan of Production: _____ years		
For Use by Notary Public						
City/County of _____ in the Commonwealth of Virginia						
On _____, _____ appeared before me and signed this (Date) (Name of Parent)						
Theatrical Permit Application granting the named minor permission to participate in the named production.						
Notary: _____				Commission Expires: _____		
Parent's Signature: _____						

For Office Use Only:

Granted Denied

Signature: _____

Date: _____

Mail Form to:

Virginia Department of Labor and Industry
North Run Business Park
1570 East Parham Road
Richmond, Virginia 23228-2360