Stagecraft Tool Contract

Dear Parent or Guardian,

____ Table Saw
____ Scroll Saw
____ Power Drill

Your student is enrolled in the Theatre Stagecraft course and we are currently beginning our unit on stage scenery. As such, soon we will begin to use the tools at the Fine Arts Center to create scenic elements. Prior to using the tools I would like to start by training each student on the tools that they will be using. Below is a list of tools available that each student would ideally be trained to use. Mr. Seidel will conduct this training with the aid of student helpers to help facilitate and ensure each child's safety. Tool training will begin
The training will include a briefing as well as a demonstration on the safety precautions of each tool. Once students have learned these safety procedures they will be asked to use the tool. Following safety precautions as well as wearing protective gear are mandatory procedures for all student while working in the shop. These are provided in the wood shop area.
Please review the tools and sign below granting permission for your child to be trained to use the tools. If you have concerns or questions or would like to know how you could assist your child please don't hesitate to e-mail Mr. Seidel at seidelmi@orange.k12.nj.us. Please initial next to each tool granting permission for your child to be trained and therefore use the tool.
Manual Tools students will learn to use Screwdriver Hand Saw Hammer Wrench
Power Tools students will learn to use: Miter Saw/Chop Saw Jig Saw/Skill Saw Circular Saw Radial Arm Saw

Pneumatic Stapler	
that tool for any project t your child use the aforem	rhich you do not initial, your child will be prohibited from using hroughout the course of the year. By signing this paper you agree to let entioned tools and understand that, should an injury occur, Mr. Seidel and
the school district are not	liable.
I DO give permission supervision.	n for my student to be trained to use the tools at OPA under Mr. Seidel's
	ission for my student to be trained to use the tools at OPA under Mr. Seidel's alternate assignment be given.
Sign:	Date:
Print Name:	
Student Name:	

Stagecraft Safety and Release Form

Tool Training Permission Slip

My child affirms that he/she has received the following theatre safety training and I					
have signed the tool training permission slip:					
Watched video: Play it Safe -	- Intro to Theatre Safety				
Completed Safety Quiz					
	D. 11				
	Policy #:				
Allergies:					
Please list any medical conditions or any	medications that your child takes that might be				
of importance in an emergency:					
. ,					
**********	******				
Emergency Contact #1 – Who should w	e notify in an emergency?				
Name:	Relation:				
	Cell Phone:				
**********	******				
Emergency Contact #2 – If first contact	is unavailable?				
Name:	Relation:				
Work Phone:	Cell Phone:	-			
*********	*****				

In case of emergency:			
I give permission for my child to be treated by paramedics.			
I do NOT give permission for my child to be treated by paramedics.			
By signing this permission slip I allow my student to use the power tools at the Fine			
Arts Center under the supervision of Mr. Cupo in the classroom setting.			
Parent Name:			
Parent Sign:	Date:		
Student Sign:	Date:		