

Rec 1/31

SANDIA PREP

Master Calendar Event Request

Today's Date 1/30/2014 Requested by: Shelly Andes

Contact Phone Number: 239-7311 email: sander@sandiaprep.org

What: Name of Event: MTS - Rehearsals
Description of Event: Rehearsals for Into The Woods

When: Start: / / Time: AM/PM
End: / / Time: AM/PM
Setup Time AM/PM Depart Time AM/PM (for trips)
Breakdown AM/PM Return Time AM/PM (for trips)

See Attached Schedule

Where: Locations of Event: Choir Room (Mondays in Black Box)

Who: SPS Groups Involved: _____
Grade: 6 7 8 9 10 11 12
Other Groups/Schools Involved: _____
Total Number of Participants: _____

About: Departments: _____
Activity Type: _____
(i.e. Social event, Baseball, Soccer, chess club)
Event Type: _____
(i.e. assembly, game, practice, meeting, dance)
Equipment Needed: _____
(i.e. table, chairs, electronic, technical, sound, etc.)
Sporting event - Home Away (at: _____)
Setup Instructions: _____

Documents to be Attached to file: Insurance Certificate
Schedule Attached !!

Events Coordinator _____ Director of Studies _____ IT Dept _____
Athletic Director _____ Maintenance _____ scanned _____
Business Office _____ Coordinator(s) _____ attach. _____

Into the Woods

Rehearsal Schedule

Sunday 1/26 to Thursday 2/13

As a general rule, rehearsals will be conducted:

- Sundays 1pm to 6pm
- Monday through Thursday, 6:30pm to 9:30pm
- Fridays and Saturdays OFF

Please note that Saturday 2/1 will be our **full-cast** read-through.

The planned location for each rehearsal is marked with the < >. You will be contacted if this needs to change.

Also keep in mind that the rehearsal days and locations, as well as the people called for each rehearsal, are subject to change. You will be expected to comply by the conflicts that you provided during auditions.

You will be expected to bring a recording device (iphone, walkman, whatever it takes) to all music rehearsals, in order to record your vocal lines to work on in your own time.

Sunday 1/26: Music <Sandia Prep>
1 – 2:30 Aaron, David

Monday 1/27: OFF

Tuesday 1/28: Music & Character Study <MTS>
6:30 – 8 Jonathan
8 – 9:30 Tasha

Wednesday 1/29: Music & Character Study < Sandia Prep>
6:30 – 8 Jim, Dennis
7:30 – 8:30 Tahirih

Thursday 1/30: Music & Character Study < Sandia Prep>
6:30 – 7:30 Derrick
7:30 – 8:30 Jessica

Saturday 2/1: Read-Through <MTS>
3:30 – 7 Full-Cast



CERTIFICATE OF LIABILITY INSURANCE

OP ID: DC

DATE (MM/DD/YYYY)

01/29/2014

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Mears Insurance Agency Inc 14061 Thirteen Mile Warren, MI 48088 Daniel J. Castle - Theatre		CONTACT NAME: Daniel Castle PHONE (A/C, No, Ext): 231-229-0200 FAX (A/C, No): 231-259-0201 E-MAIL ADDRESS: ralphie116@aol.com PRODUCER CUSTOMER ID #: MUSIC-2	
INSURED Musical Theatre Southwest PO Box 81052 Albuquerque, NM 87198-1052		INSURER(S) AFFORDING COVERAGE INSURER A: U.S. Liability Insurance Co. INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	

COVERAGES**CERTIFICATE NUMBER:****REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	GENERAL LIABILITY			NPP25550147	03/15/2013	03/15/2014	EACH OCCURRENCE	\$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	<input checked="" type="checkbox"/>					DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR						MED EXP (Any one person)	\$ 5,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						PERSONAL & ADV INJURY	\$ 1,000,000
	<input type="checkbox"/> POLICY	<input type="checkbox"/> PRO-JECT	<input type="checkbox"/> LOC				GENERAL AGGREGATE	\$ 2,000,000
	AUTOMOBILE LIABILITY						PRODUCTS - COMP/OP AGG	\$ 1,000,000
	<input type="checkbox"/> ANY AUTO							\$
	<input type="checkbox"/> ALL OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident)	\$
	<input type="checkbox"/> SCHEDULED AUTOS						BODILY INJURY (Per person)	\$
	<input type="checkbox"/> HIRED AUTOS						BODILY INJURY (Per accident)	\$
	<input type="checkbox"/> NON-OWNED AUTOS						PROPERTY DAMAGE (PER ACCIDENT)	\$
	<input type="checkbox"/> UMBRELLA LIAB	<input type="checkbox"/> OCCUR						\$
	<input type="checkbox"/> EXCESS LIAB	<input type="checkbox"/> CLAIMS-MADE					EACH OCCURRENCE	\$
	DEDUCTIBLE						AGGREGATE	\$
	RETENTION \$							\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	<input type="checkbox"/> Y/N	<input type="checkbox"/> N/A				WC STATU-TORY LIMITS	OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)						E.L. EACH ACCIDENT	\$
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	\$
							E.L. DISEASE - POLICY LIMIT	\$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
 The certificate holder is added as an additional Insured as respects the negligence of the named insured regarding: "Into the Woods"

Rehearsals: January 26, - February 17, 2014

CERTIFICATE HOLDER**CANCELLATION**

Sandia Preparatory School
 Choir Room
 532 Osuna Blvd.
 Albuquerque, NM 87113

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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