### **MEMO**

TO:

Parent or Guardian of Child(ren) 15 and under as of 03/29/24

FROM:

Mallory Butler, Human Resources

RE:

**Entertainment Work Permit** 

DATE:

01/01/24

As of 1991 The Great Passion Play was required to have Entertainment Work Permits for cast members that were age 15 and under. Please remember that the Elna M. Smith Foundation does not employ children under five years of age. However, children that will turn five during the season will need a permit before they can be hired.

For the 2024 season we must have an Entertainment Work Permit back from the Arkansas Department of Labor before the child 15 and under as of 3/29/24 can begin work. In order to accomplish this, we are requesting the following information to be attached to his/her regular application:

- 1. The front side of "Application for Employment of Minor" (Form DOL 22.6—Rev.) must be completed and signed by both the parent or guardian and the child as well. Please do not sign for the child no matter his/her age. A mark is acceptable if the child cannot sign.
- 2. Proof of age.
  - Generally, this is a copy of the child's birth certificate. If the child worked on a permit last year, we have a copy of his/her birth certificate already. If the child did not work, you must supply a **copy** of his/her birth certificate.
- 3. For those children 15 and under as of 3/29/24 that will be enrolled in school any time during the Passion Play season (this includes kindergarten), a written statement from the child's principal must be provided "as to the academic standing of the child, the advisability of allowing the child to work, and the arrangements for meeting the state's compulsory attendance law." In other words, the principal's written statement must say that the child's being in the play will not hinder his/her attendance nor will it affect his/her grades. **NOTE:** Parents of home-schooled children may provide this information upon verification that the child is enrolled in home school. Please attach your statement as well as the verification that the child is enrolled in home school. (**Notice of Intent to Home School**)
- 4. For those children <u>under</u> (6) years of age as of 3/29/24, please provide a written statement from a doctor licensed to practice medicine in the State of Arkansas "as to the health and the advisability of allowing the child to work. If the child is not a resident of Arkansas, a written statement from a doctor licensed to practice medicine in the state of the child's residence, together with a copy of the doctor's license may be submitted."
- 5. If, by any chance, you as the child's parent will be unable to be in the play with your child you must complete a "Designation of Sponsor For a Minor". You must get the permission of an adult cast member (age 18 or older) to agree to be a sponsor for your child. Remember the sponsor assumes responsibility for the child's actions and the child agrees to obey the sponsor. The Great Passion Play Production Manager reserves the right to approve all sponsors. While the sponsor does **not** need to sign the form, please be sure that you sign.
- 6. As of 1/01/98, the Elna M. Smith Foundation's Board of Directors approved a Drug/Alcohol Testing Policy for reasonable cause which shall become part of terms and conditions for all employees including cast members. This policy will be made available to you at our first rehearsal. For those applicants under age 16 as of 3/29/24, a parent or guardian must sign an Acknowledgment of Drug/Alcohol Testing Policy form as a condition of employment. You will be given this form along with the policy.

Please be sure to bring all the required forms to cast registration on February 25<sup>th</sup>, 2024. Failure to do so could result in your child not being able to work. The Department of Labor has final authority to whether a permit will be issued.

# ENTERTAINMENT APPLICATION FOR EMPLOYMENT OF A MINOR

ARKANSAS DEPARTMENT OF LABOR, LABOR STANDARDS DIVISION 10421 WEST MARKHAM ST, LITTLE ROCK, AR 72205 501-682-4500

### Section 1 STATEMENT OF PARENT, GUARDIAN OR CUSTODIAN

(This statement must be com- guardian or custodian, and a	pleted by the parent, guardi so by the child.)	an or custodian of this child and si	igned by the parent,
		Arkansas	
(City or Town)		, Arkansas, (Month, Day and Year)	
I, the undersigned, hereby	affirm that I am the		
		(Parent, Guardian or Custoo	lian)
of			now residing at
(First Name)	(Middle Name)	(Last Name)	, now rootung ut
((	Give Street and Number, Cit	ty, County, State, Zip Code)	
and that is the	child of		
(He/She) (1	it, 2 <sup>nd</sup> , etc.)	(Father's Full Name)	
and			
and	(Mother's M	laiden Name)	
and was born in			
and was born in(C	ity)	(County)	(State)
on the day of	(Month) (Vo	ear) , and is now	years of age
School last attended	Name of School)	(Location)	, in
Grade completed			(rear)
Grade completed			-
Child will be employed by			
	(Giv	ve Name of Employer and Address	s)
as			
	(Occupation	of Minor)	
and I am willing that	be so employed, and ask	that an employment certificate	be Issued to said
child as provided by law.			
		(Signature of Parent, Gua	ardian or Custodian)
(Signature of Child – Must Sign Own Name)		(Address of Parent Gua	rdian or Custodian)

### INTENTION TO EMPLOY (This form is to be filled out by Employer) Section 2

	Date:
I, the undersigned intend to employ:	
(Name of Minor)	(Address of Minor)
in the capacity of	
for	(Specific Occupation)
he time period	
	(Dates of Employment)
hours per day, beginning	a.m. and ending p.m., at(Location)
The child's rate of pay will be	
	(Hour, week, month)
Name of the employer representative of the place of employment	designated to coordinate all matters relating to the child's welfare
Description of work minor is to perfor avolved:	m, including any athletic activity, stunts, or special effects
The undersigned intends to employ the	e above-named minor immediately upon receipt of an the Arkansas Department of Labor and agrees to comply with the
rovisions of Arkansas law and regular	tions and the federal Fair Labor Standards Act.
	(Signature of Employer or Authorized Agent)
	(Address of Employer)

#### Section 3. **ATTACHMENTS**

- 1. Proof of Age
- 2. Statement from a doctor, If applicable
- 3. Statement from school principal, If applicable4. Proof of workers compensation

## **DESIGNATION OF SPONSOR FOR A MINOR**

I, the undersig	ned, hereby affirm that I am	the	of minor child,
		Parent, Guardian, Cust	
13			I hereby designate
First Name	Middle Name	Last Name	
First Name	I a Name	as an adult s	ponsor to accompany the
	Last Name		
above named o	child while is em He/She	iployed as a cast membe	er of The Great Passion Play
in Eureka Sprin	gs, Arkansas, during the 202	4 season.	
the cast rooms	ent puts his/her own name or perform without that pa e parent cannot attend.		
Signature of Parent,	Guardian, or Custodian		
Street Address of Pa	rent, Guardian, or Custodian		
City	State	Zip Code	
Phone Number of Pa	rent, Guardian, or Custodian		