

DRAMA WITH DRAGONS

12 week programs in the Lawrence Barn, Hollis

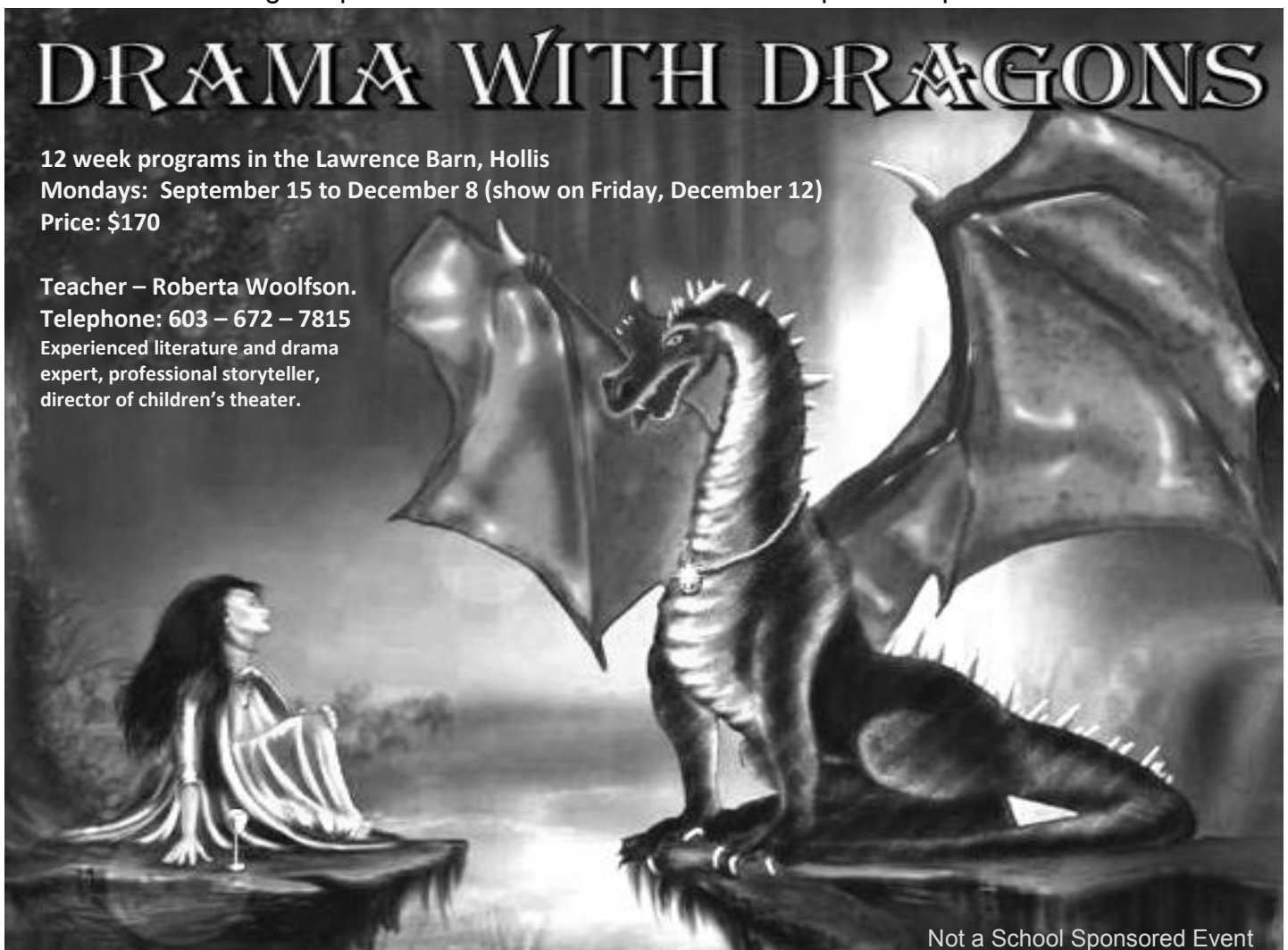
Mondays: September 15 to December 8 (show on Friday, December 12)

Price: \$170

Teacher – Roberta Woolfson.

Telephone: 603 – 672 – 7815

Experienced literature and drama expert, professional storyteller, director of children's theater.



Not a School Sponsored Event

Dynamic Dragons 3:30 to 5 PM. 10 to 15-year-olds

Young teenagers heroically pit themselves against dragons – real and imagined. Three short plays:

The Tomboy and the Dragon – a spoof. The spunky princess slays the Dragon for her timid boyfriend.

The Soul of a Dragon – design and make your own shadow puppet – with jointed wings and a soul that only you can connect with. Write your own script and fly high.

The Reluctant Dragon – teenagers make friends with a gentle poet of a dragon who does not want to fight in the tournament.

Learn stagecraft, characterization, create your own production. Warm-up with theater games and improvisation. (Beginners welcome). Open house/play reading on Thursday, September 18 – all welcome.

How I would train my Dragon 5:00 to 6:30 PM. 7 to 11-year-olds.

Fly to new worlds with wonderful Dragon stories from Merlin the magician's Dragon to the spunky "Paper Bag Princess" who conquers her own Dragon. Meet the "Matchbox Dragon" who escapes in the classroom to cause chaos! Warm up with scenes from the movie.

The children will turn these beautiful stories into plays and explore new realms of their imagination with music, movement and poetry. They will present a show in the last lesson with the older group.

The Philosophy

"I believe drama should be an integral part of a child's education, and I am involved with the workings of the imagination and the craft of communication. Drama is so much more than theater, which deals with a performance and an audience. I have seen so many workshops in which the production is more important than the child's development. I am concerned with providing opportunities for invention and expression, with an understanding of human situation and behavior through movement and speech; with a bringing to life - in a way that adds to personal experience. Drama cannot be separated from the arts - music, movement, speech and song, the visual arts, poetry, technical skills, history and literature, especially storytelling. Drama is vital to all life skills!"

Aims and Objectives.

1. To stimulate the pupils imagination and to extend their creative awareness.
2. To develop the skills required for efficient communication, both audible and visual.
3. To liberate pupils from self-consciousness in order to develop their whole personality, physically, emotionally, and intellectually.
4. To develop the pupil's concentration.
5. To intensify their awareness of people and things around them.
6. To impart some knowledge and appreciation of the history and the practice of drama and the theater.

To do all this in a homely atmosphere of comfort and fun.

DRAMA REGISTRATION FORM - Mail to: Roberta Woolfson (Include check made out to Town of Hollis) 360 Federal Hill Road, Milford NH 03055

Students Name: _____

Address: _____

Date of Birth: _____ Age: _____ School Grade: _____

Does participant have any health disorders, medication, or emotional limitations we should know about?
Please add details on separate sheet if needed.

SELECT COURSE: 3:30pm 5:00 pm

In case of injury, medical authorities will not undertake any medical treatment without parental/guardian consent. This form allows for such medical care should you not be available to give permission. It will be kept by the teacher in case of emergency.

I agree to have my daughter/son treated for emergency medical and/or dental problems that should result from injuries received provide a licensed physician or dentist advises such treatment. I accept full responsibility for the cost of the treatment.

I WILL NOT HOLD ROBERTA WOOLFSON, LIGHTSUP DRAMA or THE TOWN OF HOLLIS RESPONSIBLE FOR ANY INJURY OR COST.

Parent/Guardian Name: _____ (Please PRINT name)

Parent/Guardian Signature: _____ Date: _____

Home Phone: _____ Cell Phone: _____ Email _____

Health Insurance Provider: _____ I.D./Group No. _____