Performance Guidelines

Thank you for your willingness to perform in Star Studio at Children's Hospitals and Clinics of Minnesota. We look forward to having you on our show. In order to make your appearance run smoothly, please read the following list of guidelines.

PERFORMANCE AREA

- Our shows are filmed in Star Studio

 Children's very own performance space! The studio is located on the
 Minneapolis campus on the 1st floor of the main hospital. In St. Paul, Star Studio is located on the 3rd floor
 inside the Child Life Zone.
- There is often a live audience however, because this is a hospital setting, we cannot predict the number of children that will be able to attend in person. However, children throughout the hospital will watch the show live from televisions in their rooms.

AUDIENCE

- The audience consists of children from toddlers to teenagers, as well as parents, friends and relatives of patients at Children's.
- The number of viewers varies depending upon the hospital population at that time. Some children may come to the performance area. Children who cannot leave their rooms can watch the performance on television and can call in during the show.

CONTENT

- Because the audience reflects a wide variety of social, religious and political backgrounds, performers should make their presentation neutral.
- Your presentation should not deal with emotional themes such as death, abuse, separation, illness, medical procedures, medical personnel, mutilation, abandonment, or divorce.
- Please avoid any content involving profanity, knives, guns, latex balloons, candles (flame), or any real or imaginary weapons.

ON-AIR PRESENTATION

- Maintain your normal speaking voice.
- Treat the camera as one of the audience. Remember that the majority of children are watching from their rooms.
- You are more than likely going to have a host with you, and its easiest to allow them to facilitate phone calls.
- In Minneapolis, the show is done in front of a green screen. Try to avoid wearing any green.
- The shows are intended to be interactive. The Producer/Host will collaborate with you about ways you can invite patients to call the show or engage with those in the audience.
- If singing, keep songs upbeat and create a feeling of well-being and happiness.
- Arrive early and allow enough time before the show for set-up. We recommend that you arrive no later than 30 minutes before show time so that there is plenty of time to get organized, meet the staff, do a sound check as needed, and review the show with the host/producer.. We will support and assist you in any way.
- All guests must sign a confidentiality agreement and photo/video release form(s). See attached form below.

* Please note that no photos and/or video can be taken of patients. If you or your guest wants a photo during your performance, we ask you to be mindful of the others in the audience/lens.

THANK YOU!

We are excited to have you visit Star Studio. Thank you for your interest. We look forward to your visit to Children's Hospitals and Clinics of Minnesota! If you have any questions or comments concerning your special appearance, please contact: Eriq Nelson at 612-813-8649 or Seth Kanne at 612-813-6429. Please be sure to let us know if you are arriving to the hospital in an oversized vehicle so that we can ensure there is parking for you.

Consent and Confidentiality Agreement

CONSENT

I give my permission to Children's Healthcare d/b/a Children's Hospitals and Clinics of Minnesota		
(Children's) to take photographs, voice recordings, and videos of		
(Print Performer's Name)		
for the purpose of appearing on a Star Studio production. I understand and agree to the following terms of my		

for the purpose of appearing on a Star Studio production. I understand and agree to the following terms of my participation:

- Children's has the right to reproduce, use, display, broadcast, and distribute these images and recordings in
 any media. Children's has the right to use the performer's name for promoting, publicizing, or explaining
 Children's and its activities and for administrative, education, or research purposes. I acknowledge that
 Children's owns all rights to the images and recordings; any complimentary copy provided to me is not for
 redistribution, including posting on websites, without the written permission of Children's.
- I understand that I will not receive any compensation arising from or related to the use of the images, recordings, or materials.
- I certify that my performance is the result of my own work and/or that I have the right to perform this material. I hereby defend, indemnify, and hold harmless Children's,~ its Board of Directors, officers, employees, or agents from and against claims, damages, or liability arising from or related to the use of the images, recordings, or materials, including but not limited to claims of copyright infringement.
- If I am displaying clips or other samples of my created works as part of my participation on Star Studio, I
 understand that Children's has the right to broadcast and rebroadcast the presentation of the material in the
 context of the Star Studio performance. Children's recognizes, however, that it does not otherwise own or
 have rights to redistribute such original material without my permission.
- I hereby release and hold harmless Children's, its Board of Directors, officers, employees, or agents from and against any claims, damages, or liability arising from or related to the use of the images, recordings, or materials, including but not limited to claims of rights of publicity or invasion of privacy.

CONFIDENTIALITY AGREEMENT

Each person who works, advises, or volunteers at Children's is required to protect confidential or private information. The obligation to maintain confidentiality pertains especially but not limited to the following:

- Patient and family information
- Information from the medical record
- Business information, organizational documents or other sensitive information
- Media communication

This consent applies to participation on all future Star Studio productions, until I revoke it. I understand that once I have consented to participate for a specific production and the production is complete, I may not revoke consent for that production.

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	I am 18 years of age or older. I have read this do	f age or older. I have read this document before signing below, and I fully understand the	
	contents, meaning, and impact of this consent and confidentiality agreement.		
	☐ I represent that I am the parent/guardian of the above named participant. I have read this document be		
signing below, and I fully understand the contents. meaning, and impact of this consent and coagreement.			
Print Name:		Date:	
Signature:		Relationship to Performer:	