

# Artist Facilitator Workshop Report

**What workshop are you reporting for?**

HOLDSWORTH Allegory workshops with Bethany Simons & Renata Commisso

**Please indicate the date of the workshop you are reporting for:**

Thursday, May 5, 2022

**How many participants in the workshop identified as women?**

3

**How many participants in the workshop identified as men?**

3

**How many participants in the workshop identified as gender non-specific?**

0

**Any new participants?**

Jessica Tisdall, Christian Backhouse

**Anything to note about community partner relationship?**

Michael was present and full of enthusiasm. Cheryl wasn't there this week. Judy was also extremely friendly and very helpful in helping us find a place for the box to keep on the premises between classes.

**Anything to note about participants during the workshop?**

Aaron came out of his shell even more so than last week. Started off the first week a little shy but has

grown so much in two classes. He has incredible stories bubbling in all the scenes he creates with so much attention to detail.  
→ An example is his Magician scene from the transformation game: He was in a theatre as a magician appearing just before the interval of the show. He was being mysterious but not wanting to give away too much but just enough to keep the suspense for the audience to come back after the break. He commented about his ability to focus today too and how he got to make his plans for the weekend with his friends.

Alex spent a lot of time sleeping/acting the whole time. Was a bit tired but able to contribute at times.

Emma was extremely passionate about her contributions- especially being an entertainment reporter. Such a joy to witness.

Michael noting both weeks- how professional and fantastic the Milk Crate team is!

### **What were the highlights of the workshop?**

Stories we love ---> a vibrant, interactive and nostalgic brainstorm of all the movies we love. Everybody was great at contributing and helping fill the page with ideas.

Transforming game----> Changing the Cardboard roll and Scarf into many ideas and things.

Chloe has her moment as the Queen waving in her

Scarf and also the hula dancer,

Visual imagination/journey --  
-> Flower/ Script

A lot of eagles, red and pink and purple flowers, Chloe's script was a secret.

News report! : Aaron the anchorman! Did such a great job with it. Chloe on Cameraman and loving it.

Jess invented a story from her instinct-- The tooth Fairy is real, as well as creating a story about the fashion week down on Bondi Beach from an offer that Aaron gave as the anchor man.

Christian was so into his mud wrestling. And Emma absolutely thrilled to be the entertainment reporter and the only one going to Hollywood.

"I was the only one in Hollywood"!

**Any support you would like from Margot?**

All good.

**Please attach documents here!**





**MILK CRATE THEATRE**  
 Research Team Lead  
 21 Drake Street, Melbourne, VIC 3001  
 03 9896 7122

**Collaborative Artist Intake Form**

The information you provide will help us get to know you and to support your wellbeing.

Today's date: 11/12/22

Full Name: Christian Burridge

Date of Birth: 10/12/85

Gender:  Non-binary  Female  Male  Transgender  Other

Address: 11/22 Warrigal Crescent South Co

Email: christianburridge@gmail.com

Phone Number: 0437210662

Do you identify as Aboriginal or Torres Strait Islander? Yes  No

Do you speak a language other than English? Yes  No

Do you identify as culturally and linguistically diverse? Yes  No

How did you hear about us? Volunteering

Do you have any allergies?

Do you have any support needs you would like Milk Crate Theatre to be aware of?

What would you like to achieve most from your involvement with Milk Crate Theatre?  
 Circle all that apply. Other (please specify)

Confidence	Friends	Creative skills	Challenge self
Artistic outcomes	Fun	Exploration of self	Achievement

Who do you give Milk Crate Theatre permission to contact in an emergency?  
 Emergency Contact Name: Karen Number: 0423611111

Can Milk Crate Theatre use your picture for marketing and social media?  
 Yes  No

Thank you for taking the time to fill in this form. Please turn over for page 2.

Answering the following questions is optional and all information is kept confidential.

**Do you have a lived experience with any of the following?**

Mental illness     Homelessness     Survivor of trauma  
 Physical Disability     Criminal Justice System     Domestic/Family Violence  
 Overseas born     Drug and/or Alcohol misuse     Neurological or Learning Disability

**What is your current housing situation?**

Supported Housing     Housing NSW     Community Housing  
 Rough Sleeping     Couch Surfing     Homeowner  
 Boarding House     Renting

Are you currently receiving Centrelink benefits?  Yes  No

Are you currently receiving support by other services? For example, a caseworker or a psychologist.  Yes  No

**Collaborative Artist Wellbeing**

We provide all collaborative artists with the opportunity to have a chat with our social support worker about your wellbeing with the purpose of linking you with appropriate services.

Would you like to have a chat about your wellbeing?  Yes  No  
 If answered yes, staff will contact you to arrange a time to have a chat.

**Milk Crate Theatre**  
 Assignment and Consent  
 2022

**MILK CRATE THEATRE WORKSHOPS**

I assign to Milk Crate Theatre my intellectual property in anything I create or contribute to as part of the creative workshop.

Things I create or contribute to in connection with these activities may include:

- Writing and scripts
- Movement and choreography
- Scenes and group work
- Films and photography
- Design

I give consent to Milk Crate Theatre, and persons to whom Milk Crate Theatre may license or assign creative materials to make any variation or adaptation to creative materials that I create or contribute to making, including additions to or deletions, combining those creative materials with other works, or using those creative materials in a different context than when they were first written or created.

I acknowledge that if I participate in activities, I may be photographed or filmed or have my voice and other sounds recorded as part of the activities. I consent to this and Milk Crate Theatre communicating my performance or image to the public, for example by broadcasting, on the internet or via social media) and making further distributions and uses of any such recording or image.

For the purpose of crediting my participation in activities and creation or contribution of creative materials, I wish to use the following credit (please print your name as you would like it to appear in captions, credits and acknowledgements)

I am under / over (please circle one) the age of 18 years and free to enter into this agreement, or my user, parent or guardian has the capacity to enter into it on my behalf.

Signed by: CHRISTIAN BARRAGAN

(Print name) CHRISTIAN BARRAGAN (Date) 5/4/22

**Milk Crate Theatre**  
 Collaborative Artist Intake Form

The information you provide will help us get to know you and to support your wellbeing.

Today's date: 5-5-22

Full Name: Sarveena Singh Jadhav

Date of Birth: \_\_\_\_\_

Gender:  Non-binary  Female  Male  Transgender  Other

Address: 21 Camo Circuit, Chifley

Email: Sarveena.singh@abigroup.com

Phone Number: 0800550014 0912270006

Do you identify as Aboriginal or Torres Strait Islander?  Yes  No

Do you speak a language other than English?  Yes  No

Do you identify as culturally and linguistically diverse?  Yes  No

How did you hear about us? Through my Email

Do you have any allergies? N/A

Do you have any support needs you would like Milk Crate Theatre to be aware of?  
Service availability, Double listening sometimes

What would you like to achieve most from your involvement with Milk Crate Theatre?  
 Circle all that apply. Other (please specify)

<input checked="" type="checkbox"/> Confidence	<input type="checkbox"/> Friends	<input type="checkbox"/> Creative skills	<input type="checkbox"/> Challenge self
<input checked="" type="checkbox"/> Artistic abilities	<input checked="" type="checkbox"/> Fun	<input type="checkbox"/> Exploration of self	<input type="checkbox"/> Achievement

Who do you give Milk Crate Theatre permission to contact in an emergency?  
 Emergency Contact Name: Daryl Jadhav Number: 0800550014

Can Milk Crate Theatre use your picture for marketing and social media?  
 Yes  No

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I am under Over (please circle one) the age of 18 years and free to enter into this agreement, or my carer, parent or guardian has the capacity to enter into it on my behalf.

Signed by: Jess Tisdell  
 (Print name) Jessica Tisdell (Date) 5.5.22

**MILK CRATE THEATRE**  
 Workshop Sign in Sheet

By signing in today, I agree to the Group Agreement sheet of:

Bethany Barnes + Renata Commisso  
 Round 1 | ALLISON, Wednesday  
 Thursday, 4:30pm - 6:30pm

**MILK CRATE THEATRE**  
 Workshop Sign in Sheet

NAME	PARTICIPATION IN THE PRACTICE											
	1	2	3	4	5	6	7	8	9	10	11	12
Jason Lozman												
Chloe Harrison (real)	✓											
Emma Glass	✓											
Alex James McFould	✓											
Christen Beckhouse	✓											
Jess Tisdell	✓											

Please indicate who filled out this form

Renata Commisso