

2019 SUMMER CAMP ENROLLMENT FORM

(Please complete one form per child)

Using the key below, find the camps you would like to register for, and put an "X" through the colored box.

Age 5-8
 Age 9-12
 Age 13+

WEEKLY THEATRE CAMPS

	MOVIE MAKERS CAMP	DISNEY'S HEROES & VILLAINS CAMP	ACTING FOUNDATIONS FOR TEENS	CABARET FOR TEENS	FUTURE SHOW CHOIR STARS CAMP	STAR WARS CAMP	TECHNICAL THEATRE FOR TEENS	HARRY POTTER CAMP	CLOWNING AROUND! CAMP	OSPLAY COSTUME CAMP	KIDS ON BROADWAY! CAMP	IMPROV COMEDY FOR TEENS	MUSICAL THEATRE FOR TEENS	SUPER MARIO BROS CAMP	DISNEY MUSICALS CAMP	SHAKESPEARE FOR TEENS	COLLEGE AUDITION PREP	LEGO & MINECRAFT CAMP	PUPPET MAKING CAMP	MUSICAL THEATRE DANCE FOR TEENS	BACKSTAGE KIDST CAMP	AUDITIONS FOR KIDS CAMP	SCENE STUDY FOR TEENS	MONOLOGUES FOR TEENS	FRAGMENTED FAIRYTALES CAMP	WHODUNNIT MYSTERY CAMP	SCRIPTWRITING FOR TEENS	
June 17 - 21 (9:00am-12:00pm)																												
June 17 - 21 (1:00pm-4:00pm)																												
June 24 - 28 (9:00am-12:00pm)																												
June 24 - 28 (1:00pm-4:00pm)																												
July 8 - 12 (9:00am-12:00pm)																												
July 8 - 12 (1:00pm-4:00pm)																												
July 15 - 19 (9:00 am-12:00pm)																												
July 15 - 19 (1:00pm-4:00pm)																												
July 22 - 26 (9:00am-12:00pm)																												
July 22 - 26 (1:00pm-4:00pm)																												
July 29 - August 2 (9:00am-12:00pm)																												
July 29 - August 2 (1:00pm-4:00pm)																												
August 5 - 9 (9:00am-12:00pm)																												
August 5 - 9 (1:00pm-4:00pm)																												
August 12 - 16 (9:00am-12:00pm)																												
August 12 - 16 (1:00pm-4:00pm)																												

Rate for 1-2 camps: \$150/camp • Rate for 3+ camps: \$120/camp

Number of weeks your child will attend: _____ multiplied by your rate using formula above = TOTAL: _____



PERFORMANCE CAMP: DISNEY'S FROZEN, JR.

JUNE 24-AUGUST 3
(no July 4-5)
Monday-Friday
Ages: 7-13

_____ Check here to register for AM Session (9:00 a.m. - 12:00 p.m.) (\$475/student)

_____ Check here to register for PM Session (1:00 p.m. - 4:00 p.m.) (\$475/student)

STUDENT INFORMATION:

Student Name: _____

Birthdate: _____

Shirt Size (circle one) Youth/Adult S M L XL 2X 3X

HOUSEHOLD/GUARDIAN INFORMATION:

Parent/Guardian Name: _____

Relationship to Student: _____

Home Phone () - _____ - _____

Cell Phone () - _____ - _____

Address, City: _____

State, Zip: _____

E-mail Address: _____

How did you hear about TCR summer camps? _____

PAYMENT INFORMATION:

____ Check made payable to Theatre Cedar Rapids

____ Credit card (we accept Visa, Mastercard, or Discover)

Card Number: _____

Expiration Date: _____ CWV#: _____

Signature: _____ Date: _____

Return completed form to Theatre Cedar Rapids (102 3rd Street SE, Cedar Rapids, IA 52401) or scan and email to register@theatre.org

EMERGENCY CONTACT/MEDICAL INFORMATION:

Emergency Contact: _____

Relationship to student: _____

Home Phone () - _____ - _____

Cell Phone () - _____ - _____

Primary Healthcare Provider: _____

If the student has any needs that you wish for us to accommodate, please advise us prior to the camp, so that appropriate steps can be taken to ensure the student has a safe and enjoyable experience:

RELEASE OF LIABILITY FOR CLASS PARTICIPATION:

- I agree to indemnify and hold harmless Theatre Cedar Rapids (hereinafter referred to as Theatre), its Employees, Agents, Officers, Board Members, Volunteers, or any other person against lost or expense, including attorney fees, due to bodily injury, personal injury or property damage which may result from any and all activities while participating in classes or any other activity sponsored by or conducted by Theatre, or while visiting any facilities owned by, leased by, or controlled by Theatre.
- Theatre guarantees that all equipment and facilities are in good repair and are appropriate for the purposes for which they will be put to use, and personnel are appropriately trained and screened.
- It is understood and agreed that this Release of All Liabilities shall remain in force for not more than one year from the date of this release.
- I agree to allow Theatre to use my child's image, likeness, and/or voice for publicizing theatre programs.

I am the undersigned participant or a parent/guardian acting on behalf of a child under 18 years of age.

Student Name: _____

Parent Signature: _____ **Date:** _____