## Dallas Theater – Drama Camp 2019 Registration Form

\*\*Your camper MUST fall within the age range on the FIRST DAY OF CAMP\*\*

Camp selected	Camp Ages:	Camp Dates:	Times:	Performance:	Price
	Ages 5-6 Morning	July 15th-19th	9a-12p	Friday, July 19th, 6p	\$115
	Ages 7-9 Week 1	June 17th-21st	9a-3p	Friday, June 21st, 6p	\$160
	Ages 7-9 Week 2	June 24th-28th	9a-3p	Friday, June 28th, 6p	\$160
	Ages 7-9 Week 3	July 8th-12th	9a-3p	Friday, July 12th, 6p	\$160
	Ages 10-12 Musical Theatre	July 8th-12th	10a-4p	Friday, July 12th, 7p	\$185
	Ages 10-12 Week 1	June 3rd-7th	9a-3p	Friday, June 7th, 6p	\$160
	Ages 10-12 Week 2	June 17th-June 21st	10a-4p	Friday, June 21st, 7p	\$160
	Ages 13-17 Musical Theatre	June 10th-14th	10a-4p	Friday, June 14th, 7p	\$185
	Ages 13-17	June 10th-14th	9a-3p	Friday, June 14th, 6p	\$160

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	Ages 13-17 <i>Musical Theatre</i>	e June 10th-14th		10a-4p		Friday, J	\$18				
Ages 13-17 June 10th-14th				9a-3p Frid			riday, June 14th, 6p				
Your	child <mark>must</mark> be available th	e Friday eve	ning o	f camp	week to	perform	in the play				
STUDENT INF	ORMATION										
Camper's Name:				DOB: AGE: Gender:							
School and Grade:				T-Shirt Size (Please Circle. Y = Youth A=Adult)  YS YM YL AS AM AL							
Has your camper attended a Dallas Theater Camp before?					If Yes, When?						
Parent/Guardia	an Name #1:				Cell:						
Parent/Guardian Name #2:					Cell:						
Email (this will	be our <u>main form</u> of comm	unication):			ı						
Address:											
Emergency Contact (other than parents): Eme				ergency Phone:							
Allergies/Speci	al Needs (May use back of fo	orm if neede	d):								
	mily member (besides above	•	•	•			Y N				
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	00 for full day camp, \$185 for Niday and participation in culmi					ay camp (	includes dran	na camp, <sup>1</sup>			
	oosit Fee: \$50.00 NON REFUND 0/\$135/\$65.00 is due on or be							pace. The			
	Sig	nature of Pa	rent/G	uardian:							
You will receive	a packet of information via e-m Please do not hesitate						er class detail	s/logistics			
		Theatre L	Jse Onl	<b>y</b> :							
Deposit Amt: _					_ Date:	:	Initial:				