



Beginning/Intermediate Theatre Camp (Ages 7-12) Registration Form

Camper Information – PLEASE PRINT – One form per camper

Name: _____ Gender: _____ Age: _____

Address: _____ City: _____ Zip: _____

Home Phone: _____ Cell: _____

Email: _____

Please detail any special needs our camp staff should be aware of (IE special needs, food allergies, latex allergies, etc.): _____

Parent/Guardian & Emergency Contact Information:

Parent/Guardian Names: _____ Email: _____

Home Phone: _____ Cell: _____

Emergency Contact Name/Relationship: _____

Home Phone: _____ Cell: _____

Camp Selection:

Jungle Book Kids – July 10-13 – AT LIVING HOPE CHURCH – PERFORMANCE, JULY 14 10 AM	\$150.00	
Aristocats Kids – July 24-27 – AT MEDINAH BAPTIST CHURCH – PERFORMANCE, JULY 28 10 AM	\$150.00	
Multiple Camp Discount	-\$10.00	
Early Registration Discount	-\$10.00	
Camp T-Shirt -(included)		
Circle your shirt size:		
Youth SM	Youth MED	Youth LG
Adult SM	Adult MED	Adult LG Adult XL
		TOTAL*:
<i>OFFICE USE ONLY:</i> Deposit Received _____ Balance Due _____ Balance Received _____		

*\$50 non-refundable deposit due at registration. Full payment due first day of camp. To receive multiple camp discount, all camp fees must be paid by the first day of the first camp. If a student chooses to withdraw from a camp, they must do so prior to the first day of camp. No refunds will be issued if a student has attended any camp activities.

Parental Consent & Photography/Videography Release:

I, _____, give permission for my child, _____, to participate in Overshadowed Summer Blast Theatre Camp activities. I also grant my permission to the supervising adults to permit them to use all necessary measures should emergencies arise. I release Overshadowed Theatrical Productions and all supervising adults from any and all liability. I hereby agree and consent that the photograph(s)/video(s) taken by Overshadowed Theatrical Productions may be copyrighted and reproduced for use in marketing and promotional items or other appropriate publications, any time hereafter without restriction; and that copies of said photograph(s)/video(s) will remain the property of Overshadowed Theatrical Productions.

Signature _____ Date _____

Mail Registration and Payment to: Overshadowed Summer Camp, 333 Pierce Road, Suite 195, Itasca IL 60143