

## Teen Summer Camp Intensive



2023

Take your performance skills to the next level! Two week intensive theatre camp focusing on singing, dancing, and acting! Your talent will then be put on-stage in four special performances! Registration is \$350 and due *before* casting audition.

Camp Dates: July 31 to August 11 9am to 5pm Mon-Fri Ages 13-19

Role Auditions: June 11 or 12 6pm to 8pm (must attend one)

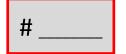
Performance Dates: Fri Aug 11, 7pm, Sat Aug 12, 2pm & 7pm, Sun Aug 13, 2pm

Name:	Main Phone:	Cell
Address:	Secondary Phone:	Cell
City:	State: Zip	p:
Email:		
(Parent information is needed for everyone under 18)		
Parent's Names:		
Parent's Phone: Main: Ce	ell Secondary:	Cell
Parent's Email:		
I understand that the tuition for Spokane Children' period. While performances of the production are something outside of SCT's control occurs, I under camp refund.	anticipated, they are not guaranteed.	In the event that
I understand that the Spokane Children's Theatre's theatre skills. I understand that I will need to investuring the two weeks of camp in order to make a second control of the standard control of the skills.	st a significant amount of time throug	1 1
Camper Signature		
Parent Signature		



Director's Comments:

## **Audition Form**



Please fill out this form clearly and completely. (front and back)

Your picture will be taken at auditions.

Page 1 of 2

Name:				Main Ph	one:	Cell
Address:				Secondar	y Phone:	Cell
City:				State:	Zip:	
Email:						
Age: Da	te of Birth:		Height:	Grade:		
Preferred Pronoun	:		_			
Parent information is	s needed for an	yone under 1	8)			
'arent's Name(s): _						
arent's Phone: M	Iain:		Cell	Secondary:		Cell
'arent's Email:						
xperience (last 3 s	shows only OF	? special Ski	alls)			
1						
Show	Ro	ole	Dire	ctor	Theatre	Year
cole(s) desired:						
ender Preferred R	tole: [] Male	] Female [	] Either			
side from being on	the stage, what	other aspect	s of the production	on do you want to	learn/help with	.?
Costumes	Props	Set	Painting	Lighting	Other	



## **Audition Form**

Please fill out this form clearly and completely.  $(front \ and \ back)$ 

Your picture will be taken at auditions.



Page 2 of 2

ame:	
EDICAL OR SPECIAL CIRCUMSTANCES INFORM	NATION (INCLUDING ALLERGIES):
The following people are allowed to pick up my ca	mper:
understand that such events can occur. If my ch	my child safe from COVID 19 Exposure, however I ild feels ill or has been exposed to COVID 19 I will test nd that SCT holds no liability for COVID 19 Exposure.
ACKNOWLEDGEMENT OF RESPONSIBILITES:	
I understand that I am responsible for attending all ca	amp days. If a conflict arises (illness or emergency), I will
notify the Artistic Team if there is an illness or emerge	ency that comes up.
I understand that I will arrive to camp on time and will have	e a positive attitude during the process.
I agree to show respect to the Artistic Team. That includes camp successful.	listening, learning, and doing what is asked of me to make this
Signature	Date:
Parent Signature	Date: