

Spokane Children's Theatre

REGISTRATION FORM: Spring Break Camp 2023 (Page 1 of 3)



AGES 6-12 YEARS OLD

Camp begins Monday, April 3rd, through Friday, April 7th, from 9:00A.M. to 3:00 P.M. There will be a showcase of *Who Donut?* at 3:15 pm on Friday, free for parents, relatives, and friends. The cost for this camp is \$230 per student. Registration is open until March 4th. Space is limited. Students will need to bring a daily sack lunch.

Please fill out the form below. For more information call 509.328.4886 or email office@spokanechildrenstheatre.org

Parent/Guardian

Name _____

Primary Phone _____ Cell ☐ Secondary Phone _____ Cell ☐

Email Address _____

Emergency Contact _____ Phone _____ Cell ☐

Student's _____ Age _____ Grade _____ T-Shirt Size _____

Name _____

Name _____

Name _____

| COST | QUANTITY | TOTAL |
|----------|----------|-------|
| \$230.00 | | 0 |
| | | 0 |
| | 0 | \$ 0 |

Payment Method:

CHECK # _____ CASH ☐ Paid Online ☐

Card # _____

Exp _____ / _____ CCV _____ Zip Code _____

T-Shirt Sizes:
YS – Youth Small
YM – Youth Medium
YL – Youth Large
S – Adult Small
M – Adult Medium
L – Adult Large

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Parent's Name _____

CAMP CANCELLATIONS: This camp is subject to cancellation if a minimum of 20 students have not enrolled. In case of cancellation, due to minimum not being met, parents/guardians will be notified by March 4th. A refund will be given in case of cancellation by SCT for any reason.

MEDIA OPT OUT:

SCT News Media and Internet Publications: Students/Actors pictures and or video may be included in our advertising of productions or events with our community through the news media (may include interview with newspaper, television, radio) and on the Internet (SCT website, Facebook, Instagram etc.). Student/Actor's photos and or videos will be published unless the parent/guardian directs otherwise. Please check the box below if you want to exclude your child from any publications.

☐

I do NOT want my child's photo or video included in news media or internet publications.

MEDICAL OR SPECIAL CIRCUMSTANCES INFORMATION.

If your child has a medical or special circumstance, please answer the questions below. Attach sheet if additional info is needed.

My child has food or other allergies or other needs that SCT should be aware of:

My child has special physical needs or communication/language difficulties that SCT should be aware of: (please describe):

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Check box if your child has NO Medical or Special Circumstances that SCT needs to know.

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The following people are allowed to sign out my camper:

| |
|--|
| |
| |
| |

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I understand that SCT will do their best to keep my child safe from COVID 19 Exposure, however I understand that such events can occur. If my child feels ill or has been exposed to COVID 19 I will test them before bringing them to camp. I understand that SCT holds no liability for COVID 19 Exposure.

Parent/Guardian Signature _____ Date _____