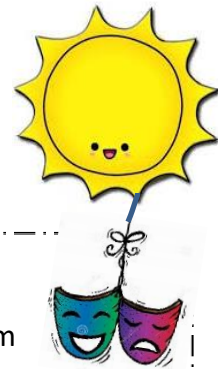




Summer Theatre Camp Registration Form



I am registering my child for Summer Camp.
Monday – Friday, August 19th – 23rd, 10 am – 2:30 pm
Performance – Friday, Aug. 23rd, 6:00 pm

Tuition: \$40 per participant

[please print]

Participant name: _____

(Ages 10-18) age: _____ T-shirt size: _____

Any medical or physical challenges to consider in a learning/performance environment?

Any allergies or other medical issues we should be aware of?



[please print]

Parent/Guardian: _____

Home address: _____ city: _____ zip: _____

Daytime phone: _____ Cell Phone: _____

Email: _____

Emergency contact: _____ phone: _____

Relation to student: _____

Email completed registration form to connectionsttheatre@gmail.com. PAYMENT can be made by check or cash on the first day of camp, or:

MAIL PAYMENT AND REGISTRATION TO: Connection St. Theatre, Faith Lutheran Church, 1212 Connection St. Shelton, 98584

Questions? Contact Michelle at connecionsttheatre@gmail.com, call/text (360) 280-3057

