

## Theatre Camp Registration Form

Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Age \_\_\_\_\_ M/F \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_

Postal Code \_\_\_\_\_ Phone# \_\_\_\_\_

School attended \_\_\_\_\_ Grade \_\_\_\_\_

Sessions selection: (please check week(s) chosen and enclose payment with the form)  
Each week is \$105.00 and each additional child in the family is \$95.00.

July 4 to 8	August 1 to 5
July 11 to 15	August 8 to 12
<del>July 18 to 22</del> NO CAMP -----	August 15 to 19
July 25 to 29	

If you would like to come from 8:00 a.m. to 9:00 a.m. for an extra \$10.00 a week, please check here. \_\_\_\_\_

Total amount submitted: \_\_\_\_\_

### Parental Contact Information

Information	Mother	Father
Name		
Place of Work		
Telephone		

Emergency contact if parent is unavailable \_\_\_\_\_

Phone number \_\_\_\_\_ Relationship \_\_\_\_\_

Previous camp experience \_\_\_\_\_

Medical information (allergies, medication, skin irritations from make-up, etc.)

\_\_\_\_\_  
\_\_\_\_\_

Camper's interests and hobbies \_\_\_\_\_

Release: I hereby release Theatre Tillsonburg from all claims for damages arising from an incident or injury which is caused by or arising from any participation of the participant named herein during any program or in any facility at any location where a program is held.

Parent/Guardian signature \_\_\_\_\_ Date \_\_\_\_\_

Return to: Theatre Tillsonburg Summer Camp  
Box 64,  
Tillsonburg, Ontario N4G 4H3

\*\*Payment in full required for registration.