

Harris County Ensemble Theatre

2011 Summer Theatre Performance Camp Registration

It's all about KIDS!

- To provide creative learning experiences that are fun and engaging.
- To help young people develop self-esteem and respect for their peers.
- To encourage young people to interact and relate with others in a safe, supportive atmosphere.
- To expand students' ideas of what art is and can be.
- To help to build a lifelong love of the arts.
- To provide an understanding of the roles necessary to mount a theatrical production.
- Will spend two weeks in high speed rehearsal for the musical: **Godspell Jr.**
- Students must bring a lunch and water to drink throughout the day.

The camp will be held at Harris County Carver Middle School (HCCMS) in Hamilton, GA.

Student Information

Student Name	<input style="width: 95%;" type="text"/>	Phone #s:	
Parent(s) Name	<input style="width: 95%;" type="text"/>	Cell	<input style="width: 95%;" type="text"/>
Address	<input style="width: 95%;" type="text"/>	Home	<input style="width: 95%;" type="text"/>
City/St/Zip	<input style="width: 95%;" type="text"/>	Work	<input style="width: 95%;" type="text"/>
E-Mail(s)	<input style="width: 95%;" type="text"/>		
Grade Next Year	<input style="width: 80%;" type="text"/>	T-shirt Size	<input style="width: 80%;" type="text"/> indicate adult or child size
Emergency Contact	<input style="width: 95%;" type="text"/>	Phone #	<input style="width: 95%;" type="text"/>
Medical Information	<input style="width: 95%;" type="text"/>		

Medical Consent and Release of Liability

I, the undersigned parent or guardian of _____, a minor, do hereby authorize the directors and teachers of Harris County Ensemble Theatre as agents for the undersigned to consent to medical treatment in an emergency. I hereby release and discharge HCET and HCCMS from any and all claims for personal injuries. I agree that photographs of this student taken during workshop hours may be used for promotional purposes by HCET, but will not be used by other organizations without additional written consent.

Signature _____ Date _____

Payment Information

To secure enrollment, please send **\$200 payable to HCET**, to the address below. Full payment is due before the first day of class. **REFUND POLICY:** Full refund only if class is cancelled by Harris County Ensemble Theatre. I understand the cost and refund policy for Harris County Ensemble Theatre's Summer Program 2011.

Signature _____ Date _____

Mail completed form and a check to secure your child's spot to:

Merrill Cheyne
103 Grove Rd.
Cataula Ga. 31804

In the check memo blank put: *your child's name and HCET Camp*

