

Arts in Motion Theater Company

2019 Theater Summer Camp Registration Form

Child's Name: _____ M/F: __ Age & Birthdate: _____

Parent's Name(s): _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____

Email Address: _____

Emergency Contact Name: _____

Emergency Contact Phone: _____

A new theme each week! Directed by: Jacob Dunham

Camp will be held at John Fuller Elementary School

8AM Drop off/3pm Pick up* Free Performance Fridays at 3pm

Campers should bring water and a brown bag lunch each day

<u>Select week(s)</u>			<u>T-Shirt Size</u>						
<input type="checkbox"/>	Week 1 July 15-19	The Mystery Of The Missing Medallion	<input type="checkbox"/>	Week 2 July 22-26	Hansel and Gretel	<input type="checkbox"/>	Small	<input type="checkbox"/>	Youth
<input type="checkbox"/>	Week 3 July 29-Aug 2	This Is A Test	<input type="checkbox"/>	Week 4 Aug 5-9	Wiley And The Hairy Man	<input type="checkbox"/>	Medium	<input type="checkbox"/>	Adult
<input type="checkbox"/>	Week 5 Aug 12-16	Mother Duck And The Golden Egg				<input type="checkbox"/>	Large		
						<input type="checkbox"/>	Extra Large		

Parent/Guardian Signature: _____ Date: _____

Cost is \$125/week and \$100/week for each additional child* Ages 6-12

___ Visa ___ Mastercard ___ Discover ___ American Express ___ Check

Card Number: _____ Exp Date: _____ Sec Code: _____ Billing Zip Code: _____

Questions? Contact Ashley Gore at ashleynicolegore84@gmail.com or 603-834-8967

Mail completed form and payment to:

Arts in Motion Theater Company, PO BOX 2112, N. Conway NH 03860