

Lancaster Community Playhouse 2009 Summer Drama Camp

Please complete this registration form and mail along with payment to: Lancaster Community Playhouse, PO Box 1073, Lancaster, S.C. 29721

Deadline for registration is April 30th without a \$5.00 late fee
Members \$45 Non-members \$55 Camp will not be cancelled!

Participant's Name _____ Gender _____

Home address _____

Age _____ Birthday _____ Rising Grade _____ School _____

Home Phone _____ Parent's name _____

Parent's work and cell numbers _____

Please list any drama experience that your child has participated in:

List the names and phone numbers of the person(s) who will pick up your child

In case of emergency, please contact

Please list any medical conditions the student may have

I agree that the Lancaster Community Playhouse is released from liability in connection with medical treatment and unavoidable accidents. Lancaster Community Playhouse has permission to use necessary medical measures in the event of an emergency.

I give Lancaster Community Playhouse permission to utilize my child's photograph or likeness in camp promotional materials

Parent signature _____ Date _____