

## REGISTRATION FORM SUMMER THEATRE CAMP 2024 6/10/24–6/21/24

Please print clearly

CHILD'S NAME:			
PARENT'S NAME:			
AGE: GRADE:	SCHOOL:		
HOME ADDRESS:		ZIP: _	
PHONE NUMBERS: (primary)		(SECONDARY)	
E-MAIL ADDRESS: (primary)		(SECONDARY)	
CHILD'S EMAIL: (1F APPLICABLE)			
MEDICAL CONDITIONS:			
EXPERIENCE:			

\$375 Participation Fee is due along with this Registration Form.

Make checks\* payable to Children For The Arts and return along with the Waiver and Release Agreement to the address listed below or email to seetishrun1@aol.com.

CHILDREN FOR THE ARTS
C/O TISH POORMAN, PROGRAM DIRECTOR
1338 WESTLAKE BOULEVARD
NAPLES, FL 34103
239-571-3305

Be sure you have enclosed the Registration Form, Check, and Waiver and Release Agreement

## PARTICIPATION FEE POLICY

The Participation Fee is only refundable up until May 1, 2024.

If for any reason you withdraw your child from the Summer Theatre Camp after May 1, 2024, the Participation Fee is non-refundable and non-transferable, in whole or in part, to any other production or camp, or any other person other than an *immediate* family member.

You may transfer it to another child in your immediate family only.

Returned checks will be charged a \$35 service fee.

BY SIGNING BELOW, I UNDERSTAND AND AGREE TO THESE TERMS.		
PARENT SIGNATURE	DATE:	
*Payments may also be made via Zelle to 239-571-3305 or Venmo: @Tish-Poorman - When using Venmo please put your child's name ONLY in the memo section.	CHECK #:	



**AUDITIONS:** Auditions are held the first day of the production. We encourage your child to audition for as many roles as possible and not just one role. Our auditions are very low key and we want each child to feel comfortable when they're auditioning. Casting will be announced at the end of auditions.

**CASTING:** Please remember that all roles are very important to this production. We value each and every child equally and have chosen their role with careful consideration in the casting process. The objective of this production is to not only put on a great performance, but to make friends and have fun.

**CANCELLATION:** Roles will not be given out to those who have not paid the Participation Fee and completed the Registration Form.

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**LATE PICKUP FEE:** Rehearsals end at 4:00pm. After 4:00pm, a late fee will be charged at the rate of \$10.00 for each 15 minute interval or fraction thereof.

- Children must wear closed toe shoes and comfortable clothing.
- Pack a snack and water for our break in the café.
- Parents must wait for their children to be dismissed and may not attend rehearsals so that all focus can be put into the production.
- Showcase performance will be held at 2:30pm on Thursday, June 20th and a cast party will be held on Friday, June 21st from 1:00pm-4:00pm.
- Have fun!

Questions should be submitted to Tish Poorman, Program Director 239-571-3305
seetishrun1@aol.com or tishpoorman@gmail.com
www.childrenforthearts.com



## **Waiver and Release Agreement**

Organizer: CHILDREN FOR THE ARTS FOUNDATION, INC.

hereinafter referred to as CHILDREN FOR THE ARTS

**Event**: SUMMER THEATRE CAMP

Date

PARENT/GUARDIAN MUST SIGN THIS WAIVER TO HAVE THEIR CHILD/CHILDREN PARTICIPATE IN CHILDREN FOR THE ARTS SUMMER THEATRE CAMP. PLEASE READ CAREFULLY BEFORE SIGNING

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l,	( <i>parent name</i> ) have chosen to have my
child/children,	
child will be participating in and acknowledge that my	Camp. I understand the nature of the activities that my child is in the proper physical condition and capable of a For The Arts is not in any way responsible for making rance for those participating in its theatre program.
to voluntarily assume all risks known and unknown of ited to Covid-19, and/or any contagious diseases, how its entities, directors, owners, agents, employees, volfullest extent of the law. It is my express intent that this hold harmless agreement, discharge and covenant not self and my child to release and hold harmless Release arising in connection with any activity during	For The Arts, I agree on behalf of myself and my child injuries or illnesses of any nature, including but not limever caused, and hold harmless Children For The Arts, unteers and personnel (collectively "Releasees) to the Waiver and Release Agreement shall be deemed as a to sue Children For The Arts. I agree on behalf of mysees from any and all claims, liabilities, costs and exrehearsals and performances or anytime while on the in Children For The Arts including any injuries, loss, or way to the activity.
	y take and use photographs or videos of my child as and promotional projects and that I have no rights to the
AND RELEASE. I UNDERSTAND THIS CONTRACT IT ON MY OWN FREE WILL. MY SIGNATURE IS PRO	D FULLY AGREE TO THE TERMS OF THIS WAIVER AFFECTS MY LEGAL RIGHTS, AND HEREBY SIGN DOF OF MY INTENTION TO EXECUTE A COMPLETE ALL LIABILITY TO THE FULLEST EXTENT OF THE
Print name of Child/Children	
Print name of Parent or Guardian	Signature of Parent or Guardian