



Theatre Winter Haven Academy

# Camp Theatre 2017

www.theatrewinterhaven.com

STUDENT'S NAME \_\_\_\_\_ HOME PH: \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

DAY PHONE OR CELL \_\_\_\_\_ E-MAIL \_\_\_\_\_

AGE \_\_\_\_\_ BIRTHDATE \_\_\_\_\_ GRADE COMPLETED \_\_\_\_\_

**Emergency Contact Information:**

PARENT/GUARDIAN \_\_\_\_\_ RELATIONSHIP \_\_\_\_\_

DAY PHONE OR CELL \_\_\_\_\_ E-MAIL \_\_\_\_\_

Please check the camp you wish to enroll in:

**2017 Performance Camps — June 5-25 (3 weeks, plus performances)**

Ages 7-11 — THE LION KING Kids \$399.00 \_\_\_\_\_

Ages 12 - 16 — GUYS & DOLLS, JR. \$399.00 \_\_\_\_\_

**10% CAMP TUITION discount if registered by early deadline of April 15th OR for multiple siblings:** \_\_\_\_\_

**TOTAL DUE:** \_\_\_\_\_

**METHOD OF PAYMENT (Circle One):** CASH CHECK DEBIT/CREDIT

Note: Payment Plans available.

**FOR CREDIT CARD CUSTOMERS:**

NAME ON CARD \_\_\_\_\_

ACCOUNT # \_\_\_\_\_

EXPIRATION DATE \_\_\_\_\_ DIGITS ON BACK \_\_\_\_\_

**SEND REGISTRATION FORM TO:**

Theatre Winter Haven Academy  
Chain O' Lakes Complex  
210 Cypress Gardens Blvd., SW  
Winter Haven, FL 33880

**FOR MORE INFO, CONTACT MOLLY:**

Call — 863/299-2672 Fax—863/291-3299  
E-mail — TWHAcademy@aol.com

**Medical Release:**

I, the undersigned parent or guardian of the above named minor, do hereby authorize the staff of Theatre Winter Haven as agents for the undersigned to give consent to medical treatment in an emergency.

**Photography and Video Release:**

By my child's participation in Theatre Winter Haven programs, I consent to the reproduction and/or use of any and all photographs, videotapes, films, or other recordings of my child for advertising, promotional or other purpose by Theatre Winter Haven (without compensation to my child or me).

Signature of Parent/Guardian \_\_\_\_\_

Date: \_\_\_\_\_

OFFICIAL USE ONLY: DATE REC'D \_\_\_\_\_ QB AP FP PMT# \_\_\_\_\_ PP: D \_\_\_ P1 \_\_\_ P2 \_\_\_