

# Shawnee Theatre Day Camp Registration Form

Name of Child: \_\_\_\_\_

Age: \_\_\_\_\_

Name of Parent/Guardian: \_\_\_\_\_

Parent/Guardian's Authorization of Other Person(s) to Whom the Child May Be Released to:

Address: \_\_\_\_\_

Phone (day) & Phone (evening): \_\_\_\_\_

Emergency Contact information: \_\_\_\_\_

E-mail: \_\_\_\_\_

Allergies and/or Physical Restrictions: \_\_\_\_\_

Child's Theatre Experience (If no experience, that's okay!):

I give permission for Shawnee Theatre to use my child's photo for publicity purposes: YES NO

## Shawnee Theatre Registration Agreements:

- Please note that while no previous theatre experience is necessary, it is required that the child have an interest in being involved in the day camp. The day camp will create a supportive and safe environment for the child to try something new; we only ask that they come willing to try and willing to say "Yes!" If your child is not interested in participating or is disrupting the participation of others, we reserve the right to dismiss the child from the program.
- Each child should bring their own snack and beverage each day.
- Children should wear comfortable clothes and shoes. Everything should be able to get dirty, and never hinder movement or imagination.

Signature of Parent or Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

See event flyer for cost. Payment is due upon registration, payable to Shawnee Theatre of Greene County.

You may email this form to [alterationsbytoniane@gmail.com](mailto:alterationsbytoniane@gmail.com), visit our Facebook page for a payment link, or mail with your payment to:  
Shawnee Theatre of Greene County  
616 E Furnace Rd Bloomfield IN, 47424

*If you have any questions, contact the directors Toni Scroggins - [alterationsbytoniane@gmail.com](mailto:alterationsbytoniane@gmail.com) or Jessica Barrett at 812-606-6309.*