



Musical Theatre Summer Camp 2010
June 21st - July 2nd, 2010
Grades 5 - 12

Times: 9 am - 12 noon (morning); 12 noon - 1 pm (Lunch program); 1 pm - 4 pm (afternoon)
Location: Sherwood Oaks Christian Church (2700 East Rogers Road, Bloomington)
Ages: Grades 5 through 12 (see separate form for younger grades)
Performances: Friday, July 2nd at 2:30 (Preview- by invitation only) and 7:00 pm
Participants in the morning master class sessions will be part of a Musical Revue, which will take place as the first act, followed by *Seussical, Jr.* as the second act. Full day campers will participate in the entire production. Tickets will be \$5 and sold at the door.

Please indicate the camp option(s) for which you would like to register (See details below):

_____ Morning camp (A camp T-shirt to be worn at the Musical Revue is included.) \$150

_____ Supervised lunch program (available only for full day participants) \$ 10
-Student must provide their own sack lunch

_____ Afternoon camp (Please indicate emphasis preference. See details below.) \$150

_____ *Seussical, Jr.* performance track (Costumes included)

_____ *Seussical, Jr.* tech track (Materials included)

Seussical, Jr. T-shirt optional (with cast/production list on back) \$ 6

Total amount enclosed: _____

Participants in the morning session will be grouped into master classes according to grade and ability. The musical revue will showcase a culmination of elements learned during camp. Afternoon campers can choose to participate with either a performance or tech track emphasis. Those who register as performers will be cast in the musical *Seussical, Jr.* Auditions will be the first day of camp. Tech track students will have their own set of master classes with an emphasis on learning set, costume, and lighting design, as well as other behind the scene skills necessary to put on a production. They will then use these skills to create scenery, costumes and help run the *Seussical, Jr.* production. No prior theatre experience is necessary and all children are invited to participate.

There is limited space available. Registrations will be accepted on a first-come basis. Your child's spot in camp will be reserved when both the registration form and payment are received. Confirmation of your child's accepted registration will be acknowledged by email. No refunds after April 1st.

To register, please return this entire registration form with payment (checks payable to Stages Bloomington) to: *Stages Bloomington, P.O. Box 5036, Bloomington, IN 47407* or register with a credit card by following the link at www.stagesbloomington.com.

Questions sent to info@stagesbloomington.com will be promptly answered.

**Stages Bloomington 2010
Summer Camp Registration Form
Grades 5 – 12**

Student's Name _____

Student's School _____ Student's grade level in 2010-11 _____

T shirt size (please circle one, if applicable): Youth XS S M L Adult S M L XL

Parent/Guardian Name/s _____

Street Address _____

City _____ Zip Code _____

Home phone _____ Cell phone _____

E-mail Address/es (for Stages correspondence only) _____

Emergency Contact Name _____

Home phone _____ Cell phone _____

Please list any allergies or medical conditions of which Stages Bloomington should be aware:

Transportation Proxy:

Please list any people other than yourself who are authorized to pick up your child from camp:

1. _____ 4. _____

2. _____ 5. _____

3. _____ 6. _____

Please initial if the following applies to your child:

_____ My child is allowed to sign themselves in/out.

_____ My child is registered for morning and afternoon, but will be leaving during the lunch hour.

Photo/Audio/Videotape Release:

I understand that audio recordings, photos, and/or videotapes may be published of the participants of Stages Bloomington Summer Camp, including my child. I hereby give my consent for my child to be audio recorded, photographed or videotaped in connection with his/her participation in the program. I further agree that all such audio recordings, photos or videotapes shall be the exclusive property of Stages Bloomington and, subject to the limitations expressed below, I release and give to Stages Bloomington all rights of ownership and all rights to copy, and publish, and use such audio recordings, photos and videotapes. I acknowledge and agree that Stages Bloomington may use any of the aforementioned materials for educational and promotional purposes, including but not limited to publication in brochures and other promotional materials and on the Stages Bloomington website. I understand that Stages Bloomington will not identify my child or allow any third party to use the photos and videotapes for commercial purposes without obtaining my written permission first.

Medical Treatment Authorization:

In case of an emergency, I authorize Stages Bloomington to take my child to the nearest medical facility and further authorize that facility and any of its staff or any licensed physician to perform any medical treatment (such as admission to emergency department or hospital, surgery, administration of medication, general treatment) upon my child. I/we agree to be fully responsible for all costs of such treatment.

Assumption of Risk and Release from Liability:

In consideration of Stages Bloomington’s services rendered, and services to be rendered in organizing and managing the “Camp” and in consideration of the Child’s participation in the Camp, Child and Parent, acting for the Child, hereby:

1. State that they understand that certain risks are inherent in participation and that they fully accept those risks. These risks may include, but are not limited to, such things as incidents and accidents related to productions, adverse weather conditions, and other physical, mental, and emotional injury.
2. State that they understand that some of the assistants with the Camp are parents or students who may not be agents or employees of Stages Bloomington.
3. State that they fully understand the above risks and the scope of the activities involved in the Program and agree to assume the risks of the Child’s participation in the Camp, including the risk of catastrophic injury or death.
4. Release and fully discharge Stages Bloomington from all liability in connection with the Child’s participation in the Camp, for or on account of any injury to or illness of the person or death, or for account of any loss or damage to any personal property or effects owned by me.

I HEREBY EXECUTE THIS TRANSPORTATION PROXY, MEDICAL TREATMENT AUTHORIZATION, PHOTO/AUDIO/VIDEOTAPE RELEASE AND ASSUMPTION OF RISK AND RELEASE FROM LIABILITY FORM.

Signature _____ Date _____

Name Printed _____