



# Summer Camp 2019

North Middle School Auditorium

**AGES: 7 – 15**

## JUNE 17, 2018 – JUNE 28, 2018

Monday, June 17<sup>th</sup> – Friday, June 21<sup>st</sup> (9:00am-4:00pm)

Monday, June 24<sup>th</sup> – Thursday, June 27<sup>th</sup> (9:00-4:00pm)

Friday, June 28<sup>th</sup> (9:00am-1:00pm, 7:00pm Performance)

*Children must be in attendance for all camp days during the second week.*

**FREE Performance of Falls First-Act Theater Production**

**Friday, June 28<sup>th</sup>, 2019 at 7:00pm for friends, family and guests.**

## Tuition: \$275.00, due by May 1, 2019

\$50.00 Non-Refundable Cancellation Fee

(Limited to 60 participants)

Scholarships available.

Youth Name: \_\_\_\_\_ M \_\_\_\_\_ F \_\_\_\_\_ Birthdate \_\_\_\_\_

T-Shirt Size: 6/8    10/12    14/16    Adult S    Adult M    Adult L    Adult XL    XXL

PLEASE CIRCLE ONE

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

Parent/Guardian Name(s): \_\_\_\_\_

Primary Phone # \_\_\_\_\_ Secondary Phone # \_\_\_\_\_

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

### Payment/Registration Options:

1. Online – Please make payment via credit/debit card using Falls Patio Players online payment system, located at [www.fallspatioplayers.com](http://www.fallspatioplayers.com) and email complete registration form as an attachment to [fallspatioplayers@gmail.com](mailto:fallspatioplayers@gmail.com).
2. Mail - Please mail check (payable to Falls Patio Players) and complete registration form to:  
Falls Patio Players  
P.O. Box 904  
Menomonee Falls, WI 53052



**Parent/Guardian Consent & Waiver**

I, \_\_\_\_\_ the parent/guardian of \_\_\_\_\_ hereby give Falls Patio Players permission to use any still and/or moving image, being video footage, photographs and/or frames, and/or audio footage depicting my child, taken by Falls Patio Players staff during Falls First-Act 2019 Summer Camp for any of the following uses: advertisements, marketing, leaflets, or any other such use for training, educational, or publicity purposes.

I understand that with my child's participation in summer camp there is some inherent risk, and I assume full responsibilities for any injuries incurred while participating in this program. I hereby release Falls Patio Players and its officers, directors, volunteers, agents, licenses, and affiliates from any and all liability from personal injuries, property damage, or other claims arising from, or in connection with, my child's participation in the summer camp.

Parent/Guardian Print: \_\_\_\_\_

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_