Wexford Acting Studio 2019 Musical Theatre Summer Camp Registration Form

~~ Camp Dates: June 10th-16th, 2019

Camper Name:_____

Camper Age/Date of Birth:_____

Half-Day, Ages 5-8, 9:00-1:00 $200_____ Check #_____

Full-Day, Ages 9-18, 10:00-5:00 $350_____Check #_____

Parent Name(s):_____

Camper Email:_____

Parent Email(s):_____

Home Address:_____

Camper Mobile Phone:_____

Parent Mobile Phone(s)_____

Home Phone:_____

Medical Conditions : Allergies, spectrum issues, etc. Please be honest! This is important information so that our instructors and counselors can best teach your children._____

_____

I do hereby release the Wexford Acting Studio and all instructors from any and all claims for damages or for injuries which I, or the minor student may sustain while participating in any activities with the Wexford Acting Studio Musical Theatre Camp. I do also give permission to obtain or provide any necessary medical attention for the student. Signature of Adult Student or Parent/Guardian_____

Please Send Payment and Registration to: Wexford Acting Studio 2611 Nicholson Rd. Building Two Sewickley, PA 15143. For more information, please go to our website WexfordAcitngStudio.com or call 412-491-2416