



# Youth Drama Camp 2019



### May 28-June 1, 2019

Princeton Community High School Auditorium

Open to students entering 3<sup>rd</sup> – 8<sup>th</sup> grades in the fall of 2019

\$85.00 per child (\$65.00 per additional child from a single household)

#### Fee Includes:

5 days of camp workshops, learning materials, camp t-shirt, & camp photo.  
Each family will receive a DVD and 2 free tickets to the performance.

Registration Deadline: May 15, 2019

#### Auditions

Tuesday, May 7<sup>th</sup> 5:30-7:30 pm  
Wednesday, May 8<sup>th</sup> 4:00-6:00 pm

Auditions will be held at PCHS for vocal solos and speaking parts. Auditions are optional and those who decide not to audition will still get to experience all the workshops that camp has to offer – singing, dancing, acting, set construction, and costuming. If you want to audition, you only need to attend one audition session. You can turn in your registration form and camp fees at auditions.

#### ◆Registration & Cancellation Policy

Register by May 15, 2019. Late registration (after 5-15-19) will not be guaranteed a camp t-shirt. You may cancel by May 15, 2019 and receive a full refund. If you cancel May 16-27<sup>th</sup>, you will receive a 50% refund. No refunds will be given for cancellations after May 27<sup>th</sup>.

#### ◆Policies

All photos and videos taken by GCYT shall remain the property of GCYT and may be used in promotional materials. GCYT is not liable for accident or injury during camp.

## ONLINE REGISTRATION & PAYMENT AVAILABLE!

[www.gibsoncounyyouththeatre.org](http://www.gibsoncounyyouththeatre.org)



### 2019 Youth Drama Camp Registration Form

#### Snail Mail Option

Gibson County Youth Theatre  
Kathy Evans, Treasurer  
PO Box 247  
Potaka, IN 47666

*I hereby release Gibson County Youth Theatre of liability for any accident/injury my child may incur while participating in the Youth Drama Camp. I give permission for my child's picture/video/likeness/voice to be used in promotional media.*

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

Child's Name \_\_\_\_\_ Age \_\_\_\_\_ Grade (fall 2019) \_\_\_\_\_

School to attend 2019/2020 \_\_\_\_\_ Shirt Size (youth or adult) \_\_\_\_\_

2<sup>nd</sup> Child's Name \_\_\_\_\_ Age \_\_\_\_\_ Grade (fall 2019) \_\_\_\_\_

School to attend 2019/2020 \_\_\_\_\_ Shirt Size (youth or adult) \_\_\_\_\_

3<sup>rd</sup> Child's Name \_\_\_\_\_ Age \_\_\_\_\_ Grade (fall 2019) \_\_\_\_\_

School to attend 2019/2020 \_\_\_\_\_ Shirt Size (youth or adult) \_\_\_\_\_

Address \_\_\_\_\_ City, State, Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Parent's Cell/Work Phone \_\_\_\_\_

Parent/Guardian's Name \_\_\_\_\_

Email Address \_\_\_\_\_

Please list any medications your child is taking, any behavior problems, or other concerns that we should know about on the back of this form.