



Registration Form (July 2 – July 27, 2018)

Camper's Name _____

Parent's Name _____

Address _____ City _____ Zip _____

Home Phone _____ Cell Phone _____

Emergency Contact _____ Phone _____

Camper's Date of Birth _____ Age _____

School _____ Grade (going into) _____

Email Address _____

How you heard about us _____

Hold Harmless Agreement

I, the undersigned, understand the enrollment in each session is limited and accepted on a first-come, first-served basis, that OnStage Theater Camp reserves the right to cancel or modify classes, times, or rates without notice as conditions warrant, and that I cannot hold OnStage Theater Camp responsible in any way for accidents or injuries sustained while at OnStage Theater Camp or any other location used for the purpose of instruction or performing.

Print Parent's Name _____

Parent's Signature _____ Date _____

Enrolling in: (Please check only one)

Musicals (Grades K – 12) -- \$845 (returning students \$745)

Drama Division (Grades 7 – 12) -- \$845 (returning students \$745)

(Please note: there is a \$50 cancellation fee – no refund will be given once camp begins)

Make checks payable to: **OnStage Theater Camp**

Mail to: **P.O. Box 5503, Clark, NJ 07066**



Medical Form

(Please fill out and return by the first day of camp)

Camper's Name _____

Emergency Contact _____ Phone _____

Physician's Name _____

Physician's Address _____

Physician's Phone _____

Insurance Name _____

Insurance Phone _____

Any food or other allergies: NO ____ YES ____

If YES, please explain below the allergy, the intensity of the allergy, and what should be done in case of an allergic reaction.

Any medication the camper is currently taking that we need to know about: NO ____ YES ____

If YES, please write the name of the medication below, and whether or not we need to make sure the camper takes the correct amount.



T-shirt Form

Camper's Full Name _____

Please circle the appropriate size below (*each child will receive ONE t-shirt*):

Child: *S* *M* *L*

Adult: *S* *M* *L* *XL*

Thank you,

Mike Altmann

Parent's Signature _____ Date _____