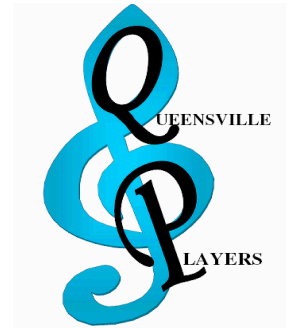


## THE QUEENSVILLE PLAYERS MUSICAL THEATRE PERFORMANCE CAMP



For Children Ages 7 to 14

This two-week program is an introduction to musical theatre. The first week will consist of short workshops in vocal technique, dance/movement, theatre exercises, audition preparation and team building. Participants will learn various aspects of stage performance. The second week will consist of rehearsals, prop and costume preparation, set design and construction, culminating in a final evening performance to be shared with parents and friends. We are offering one two-week session:



### **DR. SEUSS; IN THE HOUSE!**

**August 9 to August 20, 2010**



**MONDAY THROUGH FRIDAY ~ 8:30am to 4:30pm**  
**\$250.00 PER SESSION ~ QUEENSVILLE UNITED CHURCH**

For an additional \$25.00 per week, we offer early drop off (8:00am) and late pick up (5:00pm). Payment is to be made by certified cheque or money order.

Participants are to bring a packed lunch, snacks and drinks daily. A pizza dinner will be provided on the Friday evening performance date.

Space is limited and registration will be on a first come, first served basis. For more information please call Ruth Ottaway at 905-476-7332 or visit our website at [www.queensvilleplayers.org](http://www.queensvilleplayers.org).

**KINDLY COMPLETE THE INFORMATION ON THIS FORM AND RETURN IT  
WITH PAYMENT MADE PAYABLE TO THE QUEENSVILLE PLAYERS:**

**c/o: Ruth Ottaway  
400 The Queensway South  
Keswick, Ontario  
L4P 2C5**



# REGISTRATION FORM FOR SUMMER CAMP



Child's Name: \_\_\_\_\_

Male \_\_\_\_\_ Female \_\_\_\_\_ Age: \_\_\_\_\_

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

Town: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Parent/Guardian (primary contact):

\_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

E-Mail: \_\_\_\_\_

Session #1: \_\_\_\_\_ Session #2: \_\_\_\_\_

Amount enclosed \$ \_\_\_\_\_

## **Emergency Information**

Health Card#: \_\_\_\_\_ Dr.'s Name: \_\_\_\_\_

Phone #: \_\_\_\_\_

Emergency contact in the event that neither parent can be reached.

Name: \_\_\_\_\_

Relationship to actor/actress: \_\_\_\_\_ Phone #: \_\_\_\_\_

## **Release**

As the parent/guardian of the above participant(s), I hereby assume all risks and dangers related to the program and release the Queensville Players and their respective employees and volunteers of any liabilities for personal injury or property loss however caused. Furthermore, I agree to release and save harmless the Queensville Players from and against all claims or proceedings in respect of any costs, losses, damage or injury. I authorize any photo or recording of my child to be used for published or advertising purposes.

Signature of Parent/Guardian: \_\_\_\_\_

Date: \_\_\_\_\_

