

# SUMMER CAMP 2020

Student's Full Name:			· · · · · · · · · · · · · · · · · · ·		
Age:	Date of Birth:			Boy	Girl
Parent/Guardian Full	Name:				
Address:					
City:	State:		Zip Code:		
Mobile:		_Home:			
Work:		_Email:			
Emergency Contact a	nd Number:				
Doctor Name and Nu	mber:				
Please list all known a					

T shirt Size (Kid/Adult S, M, L, etc)

### CAMP DATES:

Theatre Camp for Ages 6-16

SGTeenies \_July 27-31 (9-12)

RATES: 1 week of camp @ \$175- 2nd week @ \$150 Sibling Discount: 1st camper @\$175, siblings @ \$150

\*\*A \$50 reservation fee is required at time of sign up. It will then be applied to your balance.

secondgenerationtheatre@gmail.com (716)508-SGT0 secondgenerationtheatre.com

Payment Options:	VISA	MasterCard	PayPal	Cash	Check (#	)
Credit Card Number:						
Expiration Date:		3 Digit Sec	urity Code	:		
<ul> <li>Sign to accept that ye</li> <li>checks can be</li> <li>Kenmore NY</li> </ul>	e sent to					

Signature - \_\_\_\_\_

#### PLEASE READ SGT CAMP POLICIES & SIGN WAIVER:

- ENROLLMENT & REFUNDS: 100% Refunds will ONLY be issued prior to the start date of the class
- PLEASE be respectful of Kenmore Presbyterian's space- no gum, food, or drinks other than water are permitted in the classroom
- Please notify SGT at (716) 508-SGT0 or secondgenerationtheatre@gmail.com if you know a student is going to miss the day or be late!

#### WAIVER

Second Generation Theatre Company, its instructors, and the various facilities are not legally held responsible for any illness, accidents, or injury that may occur to you, an adult caregiver accompanying your child, and your child. By signing or printing your name on this document, you agree to accept full responsibility for yourself and child while attending SGT summer camp.

I have read the SGT Camp policies and waiver and agree to accept them. All the information on this registration form is accurate to the best of my knowledge.

#### Parent/Guardian Signature: \_\_\_\_\_



## Second Generation Theatre Photo Release Form

I hereby authorize Second Generation Theatre Company, Inc. (SGT) to publish the photographs taken of me and/or the undersigned minor children, and our names, for use in SGT's printed publications and website.

I release SGT from any expectation of confidentiality for the undersigned minor children and myself and attest that I am the parent or legal guardian of the children listed below and that I have the authority to authorize SGT to use their photographs.

I acknowledge that since participation in publications and websites produced by SGT is voluntary, neither the minor children nor I will receive financial compensation.

I further agree that participation in any publication and website produced by SGT confers no rights of ownership whatsoever. I release SGT, its officers, trustees, and its employees from liability for any claims by me or any third party in connection with my participation or the participation of the undersigned minor children.

Student(s)

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