

# Theater Camp Registration Form

*Please have student turn this form into Miss Hardin at school. Keep flier as a reference.*

**Parent/Guardian Name:** \_\_\_\_\_

**Parent/Guardian Phone:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_  
\_\_\_\_\_

*Payment of \$175 is due by July 9th (1st meeting)*

**Acceptable forms of payment:** cash or check

**Please make checks payable to:** Jessica Hardin

**Parent Email:** \_\_\_\_\_

**Student Name:** \_\_\_\_\_

**Form of Payment:** Cash ( ) or Check ( )

**Additional Information about child:**

1. Allergies: \_\_\_\_\_

2. Medications: \_\_\_\_\_

3. Additional information instructors need to know: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_