

## QMT 2017 Theatre Summer Camp Registration

By completing this form you can sign up your child for "Wizard of Oz". The camp will be from June 5 to June 30. There are two age groups: 6th Grade to age 18 and children entering 2<sup>nd</sup> grade thru 5<sup>th</sup> grade. Camp is from 1 PM to 5 PM Monday through Friday. Call **875-9444** for further information.

## <u>June 5 to June 30, 2017</u>

## Please enroll my child for the QMT 2017 Theatre Camp

☐ 2nd - 5th grader☐ 6th grader thru 18 years old☐

First Name	Last Name			Age:
Address:	City:	State:	Zip:	_
Email address:	Phone:	<u>.</u>		
In case of an Emergency Contact:	Camper	s Sizes for Costume	er:	
Name:	Shirt/Bl	ouse		
Phone:	Pants _			
Name:				
Phone:				
The camp cost \$250 per child (however so	ome scholarships are	available) Space is l	imited to 50 c	campers.
Deposit: \$50 Make checks payable to QMT Balance Due by April 1, 2016				
☐ I will drop off my child between 12: through Friday.	45- 1:00 pm (2 <sup>nd</sup> – 5 <sup>th</sup> (	grade) and pick-up	between 5:00	)-5:15 Monday
☐ I will pay \$10 per 15 minutes if I pick	up my child after 5:1	5		
☐ I understand that Quincy Music Thea	tre requires that I cor	me into the Theatre	e to pick up m	y child.
☐ I grant QMT permission to take and upplease explain:		•	•	purposes. If no
Name(s) of adults who may pick up and dro	op off my child (Name	/Relationship to chi	ld)	