

2010 THEATRE CAMP REGISTRATION

Name _____ Age _____ ***

Address _____

Email _____

Name of Contact During Camp Hours _____

Contact's Phone Number During Camp Hours _____

Camp Dates: Please indicate which week or weeks below:

at Oak Grove UMC: **May 24-28** _____ and/or **June 1-4** _____
Oak Grove United Methodist Church: 1722 Oak Grove Road, Decatur

at Brookhaven Christian Church: **July 19-23** _____
Brookhaven Christian Church, 4500 Peachtree Road, Atlanta

IMPORTANT: The number of campers will be limited. Once the camp reaches capacity no additional registrations can be accepted. Therefore, it is necessary to return this **Registration Form** by: **May 15th for OGUMC and July 1st for BCC** (Obviously, the sooner the Registration Form is submitted, the safer for enrolling)

Camp fee: \$150 (\$125 for OGUMC or BCC member families)
additional \$10 reduction for second child from the same family
also a \$10 finder's fee for bringing a new family to camp

*****Special Four-Year Old Registration Fee for Friday (May 28 or July 23): \$20**

Deposit for Week-Long camp of \$50 is **due along with Registration Form**

(Make checks payable to **OGUMC** or **BCC** and mark "for Theatre Camp")

Amount Enclosed: _____

State below anything you would like the camp directors to know about your child:
(For instance, "allergic to tomatoes..."):