

SUMMER CAMP REGISTRATION

Did You Know?
You can register online at
www.FantasyPlayhouse.com

Complete information below (separate form for each registrant) and return with payment to:
Fantasy Playhouse Children's Theater & Academy, 3312 Long Ave., Huntsville, AL 35805 or Fax to 256-539-6835

CAMP SELECTION	
Full Day Camps	
Broadway Rocks!	\$250
Superhero Showdown	\$250
Turn Back Time	\$250
Fantastic Fairy Tales	\$250
3-Day Mini Camps	
Snoopy Goes to Camp	\$150
Camp Comedy Improv	\$150
Star Wars on Stage	\$150
Sketch Comedy	\$150
Stage Combat/Stage Make-Up	\$165
Showcases	
James & the Giant Peach Jr.	\$475
101 Dalmatians Kids	\$250
Dystopia!	\$250
Half Day Camps	
Goldie and Bear	\$145
The Mouse is in the House	\$145
Giraffes Can't Dance	\$145
Pete the Cat	\$145
If You Give a Mouse a Cookie	\$145
Dream Big, Princess	\$145
Disney Stories	\$145
Fancy Nancy	\$145
Pirates and Mermaids	\$145
Where the Wild Things Are	\$145
Under the Sea	\$145
Magic Treehouse	\$145
The Descendants	\$145
Harry Potter	\$145
HamilKIDS	\$145
The Greatest Showman	\$145
Acting for the Camera	\$160

CAMPER INFORMATION	
Full Name (of Camper) _____	
Name (for nametag) _____	<input type="checkbox"/> Male <input type="checkbox"/> Female
Age _____	DOB _____
New Student to FPCT? <input type="checkbox"/> Y <input type="checkbox"/> N	
School Currently Attending _____	Fall 2019 Grade _____
So that we may better serve you, please inform us of any allergies and/or physical, developmental or cognitive disabilities: _____	
How did you hear about Fantasy Playhouse: _____	
Each student receives a FREE t-shirt (check one):	
Youth: <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL	Adult: <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> L <input type="checkbox"/> XL

PARENT/GUARDIAN INFORMATION	
Name _____	Relationship _____
Address _____	City, State, Zip _____
Home Phone _____	Cell _____
Email Address* _____	<i>*Important! Required for confirmation purposes!</i>
List person(s) responsible for pick-up:	
Name _____	Cell _____
Name _____	Cell _____
Does anyone in your household have military affiliation? Please check all that apply:	
<input type="checkbox"/> Active Duty	<input type="checkbox"/> Reserve
<input type="checkbox"/> Civil Servant	<input type="checkbox"/> Government Contractor

TUITION	
Total Tuition	\$ _____
Early Bird Discount* (\$10 off per child per camp)	\$ _____
Season Subscriber Discount (\$5 off per child)	\$ _____
Total Amount Enclosed	\$ _____
<small>*Early Bird Discount applies to registrations received by May 1, 2019</small>	

PAYMENT	
<input type="checkbox"/> Check enclosed (make payable to "FPCT")	
Credit Card:	<input type="checkbox"/> Visa <input type="checkbox"/> MC <input type="checkbox"/> Discover <input type="checkbox"/> Amex
Name on Card	_____
Account #	_____
Exp. Date	_____ CVV _____
Cardholder Signature	_____

RELEASE AGREEMENT
<p>Although every effort is made to provide a safe environment, Parent/Guardian should recognize that there is always a risk of accident. Parent/Guardian agrees to be responsible for any medical bills incurred resulting from illness or injury during child's participation in Fantasy Playhouse Children's Theater & Academy programs. Families are expected to carry their own accident and medical insurance and agree to hold harmless Fantasy Playhouse Children's Theater & Academy from any and all liability and/or claims or damages arising out of personal injury of any kind. If necessary, Parent/Guardian authorizes Fantasy Playhouse Children's Theater to administer first aid and/or authorize medical treatment for program participant.</p> <p><i>I have read and understand all program information, and hereby grant permission for the child named above to participate in the Fantasy Playhouse Children's Theater & Academy programs.</i></p>

Parent/Guardian Signature _____ Date _____