



**The Ensemble Theatre  
Young Performers Program  
SUMMER PROGRAM APPLICATION**

Child's Name \_\_\_\_\_ Age \_\_\_\_\_ Sex \_\_\_\_\_ Grade Level \_\_\_\_\_  
 First Time Participant \_\_\_\_\_ Returning Participant; attended how many years \_\_\_\_\_

**PLEASE ATTACH THE CHILD'S MOST RECENT REPORT CARD AND WALLET SIZE PHOTO**

**PARENTS/GUARDIANS INFORMATION:**

Names \_\_\_\_\_ Relationship \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip \_\_\_\_\_

Phone: Home \_\_\_\_\_ Mom Work \_\_\_\_\_ Mom Cell \_\_\_\_\_

Dad Work \_\_\_\_\_ Dad \_\_\_\_\_

Cell \_\_\_\_\_

Email (Mom) \_\_\_\_\_ (Dad) \_\_\_\_\_

**CHECK the line before the class in which you want to enroll. CIRCLE the cost for each class.**

DATE	CLASS TITLE	AGES	TIME	COST
<input type="checkbox"/> June 15-19	Storytelling Through Puppetry	6-9	10am-11:30am	\$125
<input type="checkbox"/> June 15-19	Musical Theatre	10-17	12pm-2pm	\$125
<input type="checkbox"/> June 22-26	Storytelling Through Puppetry	6-9	10am-11:30am	\$125
<input type="checkbox"/> June 22-26	Musical Theatre	10-17	12pm-2pm	\$125
<input type="checkbox"/> June 22-26	Playwriting	9-12	2pm-4pm	\$125
<input type="checkbox"/> June 22-26	Playwriting	13-17	2pm-4pm	\$125
<input type="checkbox"/> July 6-24	*Theatre, Music and Dance	9-12	9am -12pm	\$500
<input type="checkbox"/> July 6-17	Theatre and Movement	6-9	12pm-2pm	\$250
<input type="checkbox"/> July 6-17	Theatre and Vocal Music	13-17	2pm-4pm	\$250
<input type="checkbox"/> July 20-31	Theatre and Movement	6-9	12pm-2pm	\$250
<input type="checkbox"/> July 20-31	Theatre and Vocal Music	13-17	2pm-4pm	\$250
<input type="checkbox"/> July 27-31	Playwriting	9-12	9am-11am	\$125
<input type="checkbox"/> August 3-7	Storytelling Through Puppetry	6-9	10am-11:30am	\$125
<input type="checkbox"/> August 3-7	Musical Theatre	10-17	12pm-2pm	\$125
<input type="checkbox"/> August 3-7	Stage Management	10-17	2pm-4pm	\$125

classes x \$125= \_\_\_\_\_

classes x \$250= \_\_\_\_\_

classes x \$500= \_\_\_\_\_

**CLASS TOTAL COST** \_\_\_\_\_

**REQUIRED REGISTRATION FEE** \_\_\_\_\_ \$25 or  
 \_\_\_\_\_ \$0 if already paid)

**CLASS TOTAL COST=** \_\_\_\_\_

**TOTAL COST** \_\_\_\_\_

Payment Type: Cash \_\_\_\_\_ Check \_\_\_\_\_ Credit Card \_\_\_\_\_/Type: Visa \_\_\_\_\_ MasterCard \_\_\_\_\_ Discover \_\_\_\_\_ American Express \_\_\_\_\_

Card # \_\_\_\_\_ Expiration Date \_\_\_\_\_ V-Code \_\_\_\_\_

Name (as it appears on card) \_\_\_\_\_

**(Once the selected class begins, there is no refund)**

**Parental Consent:**

I hereby grant The Ensemble Theatre the right to record, exhibit or otherwise use my child's name, likeness, photograph, voice and biographical data in materials to advertise, promote and publicize The Ensemble Theatre and The Ensemble Theatre's YOUNG PERFORMERS PROGRAM.

**Signature of Parent/Guardian** \_\_\_\_\_ **Date** \_\_\_\_\_