



SUMMER ACTING CAMP 2022

Directed by

Prestige Productions

Weekdays, July 11 – 22, 2022

Grades 1-3	9 AM – 12:30 PM
Grades 4-5	9 AM – 12:30 PM
Grades 6-8	9AM – 12:30 PM
Grades 9-12	9 AM – 12:30 PM
Grades 4-12	1:30 PM – 5 PM

****PM Sessions will be divided up based on class size, which is limited to 25**

Students are required to attend every day of acting camp and to take part in the recital.

LAST DAY OF CLASS IS A FULL DAY FOR ALL STUDENTS!!!

EARLY REGISTRATION CLASS FEE BY MARCH 31, 2022: \$235.00

CLASS FEE STARTING APRIL 1, 2022: \$260.00

Student Recital, Saturday, July 23, 2022 @ 2:00 PM

(Includes 2 free tickets to the recital-voucher must be redeemed by parent/guardian of child)

***Additional tickets available at a cost of \$9.00 per ticket, fees apply online**

*** FULL PAYMENT (BALANCE) for those PRE-REGISTERED, IS DUE NO LATER THAN:**

FRIDAY, JUNE 17, 2022 – Spots with \$50.00 non-refundable deposits will only be held until this date!

*** FULL PAYMENT DUE AT TIME OF REGISTRATION, IF REGISTERING JUNE 17th OR AFTER**

*** NO WITHDRAWALS OR REFUNDS AFTER JUNE 17, 2022**

ALL Fees are Non-Refundable – No Exceptions

**ALL FORMS IN THIS PACKET MUST BE COMPLETED AND
RETURNED TO THE STATE THEATRE FOR VALID REGISTRATION**

If reserving multiple spaces, please fill out one form per child...all attached forms must be filled out with the initial registration.

Registration deadline, if space is available: Thursday, July 7, 2022



**2022 ACTING CAMP
RESERVE YOUR CHILD'S PLACE NOW!**

**Secure your child's spot for the 2022 State Theatre's Acting Camp!
Fill out the attached forms and send them, with a \$50.00 Non-Refundable, deposit to:
State Theatre Acting Camp
453 Northampton Street
Easton, PA 18042**

The State Theatre 2022 Acting Camp will be held July 11-22, 2022

Acting Camp Recital on Saturday, July 23, 2022 at 2:00 p.m.

(Includes 2 free tickets to the recital-voucher must be redeemed by parent/guardian of child)

PLEASE INDICATE WHICH SESSION YOU WOULD LIKE TO REGISTER FOR:

Grades 1-3 AM session

Grades 4-5 AM session

Grades 6-8 AM session

Grades 9-12 AM session

Grades 4-12 PM session

*****PM Sessions will be divided up based on class size, which is limited to 25***

Students are required to attend every day of acting camp and to take part in the recital.

YES, Please register my child for an alternative time (AM/PM) if the session I selected is full

NO, Please do not register my child for an alternative time (AM/PM)-Child will not be registered

Enclosed is the \$50.00 *Non-Refundable* Registration Fee (Credit Cards or Checks ONLY)

***No Refunds for Withdrawals once full payment is made**

Payment and ALL attached forms must be received prior to a slot being held for your child.

Child's Name: _____ Entering Grade (In Fall of 2022) : _____

Please check mark: Male Female

(To be fair to all participants, please take care when entering the child's Grade Level.)

Check# _____ ***(MADE OUT TO: STATE THEATRE)***

Credit Card # _____ Exp. Date _____ CVV2* _____

Credit Card Holder: _____ Signature: _____

*The CVV2 is a verification number on your credit card. On Visa/MasterCard, it is the last three digits on the signature strip of your card.

On American Express, it is the four digits printed on the front of your card, above the card number. We do not accept Discover.

ALL Fees are Non-Refundable – No Exceptions

State Theatre Summer Acting Camp Registration / Emergency Contact Form

Parents: Please PRINT the following Information Accurately. A separate registration form needs to be completed for EACH CHILD.

Child's Full Name:		
Age:	Mother/Guardian's Full Name:	
Entering Grade:	Father/Guardian's Full Name:	
Date of Birth:	Please check mark: Male <input type="checkbox"/> Female <input type="checkbox"/>	
Child's Address	Mother's Address (if different)	Father's Address (if different)
	Home Phone:	Home Phone:
	Work Phone:	Work Phone:
	Cell Phone:	Cell Phone:
	Email Address:	Email Address:

Person(s) To Whom Child May Be Released

Name	Address	Phone number while child is in care

Parent/Guardian Signature is Required for each item – Parental Consent is needed for Child to Attend Camp

	Parent/Guardian Signature	Date
Administration of minor first aid procedures		
Video Taping/Photography/Website Photos		

Please Read and Sign Below:

I, (print name) _____ give my permission, if no one can be reached in case of an emergency, for the State Theatre staff member, to send or take my child to the nearest emergency care facility, if needed.

Parent/Guardian

Signature _____ Date _____

Child Medical Information

- In the case of an EMERGENCY, please list who should be contacted first, then second, should we need to contact you during class:

Name	Phone number while child is in care	2 nd Phone number while child is in care
1.		
2.		

Emergency Contact Person(s) if Parent/Guardian cannot be reached

Name	Address	Phone number while child is in care
1.		
2.		

Child's Full Name:

Allergies:	Special Disabilities (if any):
Medical or Dietary Information:	Medications, Special Conditions:

Child's Physician/Medical Care Provider

Physician's Name	Address	Phone Number

Health Insurance Coverage

Provider or Medical Assistance Benefits	Policy Number (Required)

Additional Information on Special Needs of Child (If applicable)

** Please list any information that would be helpful to our teachers**

State Theatre Summer Acting Camp Rules/Regulations/Payment

Please Read and Understand the Following Program Participation Rules and Requirements for Child and Parent(s)

(If not adhered to, it may result in dismissal from program.)

- **Students are required to attend every day of acting camp and to take part in the recital.**
- Last day of regular class (Friday) is a FULL DAY, morning and afternoon, for ALL STUDENTS. This is a must as final recital details/practice is done on that day.
- Students must arrive 10 minutes before class time. Do not be late. This will allow class to begin as scheduled with all students present.
- Parents must physically escort student into the State Theatre & make verbal contact with the teacher or director of the program (no matter what age, unless they are of driving age & provide their own transportation, in which case you, as parent/guardian, must submit this information in writing). Please do not drop your child at the door.
- Parents must arrive 10 minutes before pick up time. Do not be late. More than one late arrival may lead to student's dismissal from program.
- Student must dress in comfortable, and appropriate, clothes and shoes. (Such as shorts, sweats, sneakers, jazz shoes - we ask that all tops are full length and do not bare the midriff.)
- Parents are encouraged to attend all parent/teacher meetings.
- Parents are encouraged to relay any questions, concerns, or conflicts to the director of program, or a State Theatre representative.
- There is absolutely no tolerance for class disruption from student or parent. For example, but not limited to: Foul language, loud or obnoxious behavior, discrimination towards any student, parent, assistant, teacher, director, or State Theatre representative. Any of the above, or any other circumstance that is disruptive or could lead to disruption of the class, may result in student's dismissal from the program upon the State Theatre and Prestige Productions' discretion.
- We ask for parents not to stay in classrooms during class time.
- Parents may be asked and required to supply simple costume items, such as specific colored T-shirts, Pants, Shoes, etc., per student for recital, and notebook for classroom notes/music.
- Parents may be asked to volunteer time.
- The State Theatre Center for the Arts is a smoke free facility. Smoking on State Theatre property is not permitted.

Child's Full Name:

Parents: Please Read and Sign Below:

I, (print name) _____ have read, understand, and agree to the above rules, and requirements for the Summer Acting Camp provided by the State Theatre and Prestige Productions, and to the best of my knowledge, have filled out completely, and accurately all emergency contact information requested.

I do hereby assume full responsibility for any and all damages, injuries (including death) or losses that my child may sustain or incur, if any, while attending, practicing, participating or witnessing in any program, sport or physical activity occurring in or about the State Theatre premises or at any offsite location. I hereby assume full risk, waive all claims and release and hold its instructors, or partners of said program or event, individually or otherwise, harmless for any and all claims for injuries and damages.

Parent/Guardian Signature _____ Date _____