

# GULFPORT LITTLE THEATRE – SUMMER THEATRE CAMP

**Gulfport Little Theatre – July 6-24, Mon-Fri 9am to 5pm**

Name \_\_\_\_\_ M \_\_\_\_\_ F \_\_\_\_\_ Age \_\_\_\_\_

Parent/Guardian's Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_ (Work) \_\_\_\_\_

Email \_\_\_\_\_

Emergency contact name, relationship, and phone number:

\_\_\_\_\_

List any medical conditions or allergies (if none, please note):

\_\_\_\_\_

Please list any medicine(s) that your child will need to take during camp, if any (if none, please note):

\_\_\_\_\_

**COMPLETE THE FOLLOWING AND SUBMIT WITH A CHECK MADE PAYABLE TO GULFPORT LITTLE THEATRE YOUTH**

\_\_\_\_\_ Camp Grunch June 1 through 21 Cost is \$300. Must be available all 3 weeks

or

1. Check dates attending: \_\_\_ Week 1 (July 6-10) \_\_\_ Week 2 (July 13-17) \_\_\_ Week 3 (July 20-24)

# of weeks x \$100 or \$285 total = \_\_\_\_\_

2. 7-9am 'Before Care' available each day at \$10.00 per day. If using, please select days and weeks below:

June Camp Week 1 – M T W Th F Week 2 – M T W Th F Week 3 - M T W Th F # of Days x \$10 = \_\_\_\_\_

July Camp Week 1 – M T W Th F Week 2 – M T W Th F Week 3 - M T W Th F

3. T-shirts are \$10 each. Do you wish to purchase a T-Shirt? Y N Size \_\_\_\_\_ # of shirts x \$10 = \_\_\_\_\_

Total Due \_\_\_\_\_

*I, as the parent/guardian, agree to be responsible for any or all damages caused by my child during the course of this event, and I hereby give permission for my child to attend Gulfport Little Theatre's Summer Theatre Camp and to participate in any and all events scheduled. I also agree to hold harmless and release from liability Gulfport Little Theatre, its Board(s), Camp Director(s), counselors, and volunteers for any accident, illness, or injury that may occur as a result of any event related to Gulfport Little Theatre's Summer Theatre Camp. I understand that I am responsible for providing a sack lunch or lunch money for my child and for picking up my child promptly at 5pm and that additional charges may be incurred for late pickup.*

\_\_\_\_\_  
Signature of Parent/Guardian (Date)

\_\_\_\_\_  
Printed Name – Parent/Guardian

Please mail completed registration forms and payment to Gulfport Little Theatre, PO Box 567, Gulfport, MS 39502

You can also email the registration form and pay online at [www.gulfportlittletheatre.org](http://www.gulfportlittletheatre.org)

Questions? Contact Lori Grove at 228-224-8768 or email [chairman@gulfportlittletheatre.org](mailto:chairman@gulfportlittletheatre.org)