

THE KITTATINNY PLAYERS SUMMER THEATER CAMPS REGISTRATION INFORMATION

CAMPER'S INFORMATION

Camper's Last Name: _____ First Name: _____

Address: _____

Date of Birth: _____ Grade in 2024-2025: _____

T- Shirt Size: (ADULT SIZES ONLY) XS () S () M () L () XL () XXL () XXXL ()

LEGAL GUARDIAN INFORMATION

Parent/Guardian: _____ Relation: _____

Home Phone: _____ Cell Phone: _____

E-Mail: _____ Work Phone: _____

Health Insurance Provider: _____ Policy #: _____

Any imperative, medical situation to be aware? (Ex: Food Allergies):

Do we need to provide special accommodations due to disabilities? If so, please specify:

EMERGENCY CONTACT INFORMATION – LIST CONTACT OTHER THAN YOURSELF

Name: _____ Relation: _____

Home #: _____ Cell #: _____

Permission to release your child to this person? YES () NO ()

By signing this document, I agree that my child will abide by the rules and regulations set forth for this camp under the jurisdiction of the Kittatinny Regional High School Summer Camp Program. I understand the various activities provided in this camp and will notify camp director if any activities are beyond my child's limitations. To the best of my ability, all information on this form is correct and I have provided the proper medical forms required in case of allergy or drug administration. For any questions or concerns regarding these policies, please contact us at 973-383-1800 and you will be directed to the proper contact person regarding your concern. The signature below also notifies the clinic director of an insurance release (medical) in case of an injury. Once payment and information are received, there will be no refunds, except if more than one day was cancelled for rain then it would be prorated at \$33.80 a day. (We are allowed to cancel one day due to weather without penalty or refund. Second day we would return \$33.80 and so on.)

Signature: _____ Date: _____

THE KITTATINNY PLAYERS SUMMER THEATER CAMPS

**CALLING ALL DANCERS, TECHNOLOGY PEOPLE,
BACKSTAGE WORKERS, SINGERS AND ACTORS!**

A MUSICAL IN ONE WEEK JUNE 24 - June 28

**MONDAY 6/24 THROUGH THURSDAY 6/27: CAMP 8:30 am to 11:30 AM
FRIDAY 6/28 IS SHOW DAY! CAMP 8:30 am - 3:00 pm, SHOW TIME at 3:30 PM**

Your child will be instructed by the directors of the Kittatinny Players. We provide small group instruction with directors for scene breakdowns and back stage management. Our goal is to put on a full musical in one week! Kids will not only be onstage but we need people to run our backstage technology as well. Campers' roles and involvement vary as with any musical but our goal is to spread the wealth and make sure everyone gets the stage, or back stage time they need. Once we undersatnd the amount of people involved this year, we will decide on a show and announce it the first day of camp! Campers will have access to bottled water provided by the camp at all times. Snack time is provided but snacks are not supplied. Lunch, however, will be provided on Friday, which will consist of beverage, pizza, chips and dessert. Lunch accomodations can be made for dietary reason. Each camper will also receive a camp t-shirt.

PRICE PER EACH CAMP: \$174.00

INCOMING GRADES 5 THROUGH 9 FOR THE 2024-2025 SCHOOL YEAR

Registration must be paid in full in cash or check and completion of this form must be submitted by **Friday, June 7 at 12:00 pm**. Checks made payable to Kittatinny Theater Summer Camp. Payment may be made in person at Kittatinny Regional High School during school business hours or by mail. A maximum of 36 campers permitted.



**SEND PAYMENT TO KRHS THEATER CAMP:
77 HALSEY ROAD, NEWTON, NJ 07860
For more information please visit our website:
www.kittatinnyplayers.com or call 973-383-1800**



**PLEASE CHECK OFF THE APPROPRIATE BOX SO WE UNDERSTAND HOW THEY
WOULD LIKE TO PARTICIPATE IN OUR MUSICAL CAMP**

MY CHILD WOULD LIKE TO BE INVOLVED ONSTAGE DURING CAMP

MY CHILD WOULD LIKE TO BE INVOLVED BACKSTAGE DURING CAMP

PLEASE FILL OUT THE INFORMATION ON THE BACK OF THIS FORM