



Sikeston Little Theatre Kids Drama Camp

Welcome to SLT Kids Drama Camp 2023 Registration!

I wanted to give campers and parents an insight to what we have planned for Camp Week. I have built a schedule centered around being in character, line memorization, movement, creativity, and most importantly, FUN!!!

Campers will learn stage direction, how to portray various emotions, work as a team, create their very own costumes and backdrop, and at the end of the week, perform a silly version of Shakespeare's *Julius Caesar*!! Also, the day before the performance, campers will be rewarded for their hard work with outside water games!

There will be an informational meet 'n greet for campers and parents on Saturday, June 3rd at 12pm in the auditorium of SLT. This is when we can get campers first signed in, meet the Camp Admin., give out T-shirts and schedules, get questions answered, and I will go over the details of the week and the Showcase.

If you have any preliminary questions about Registration or Camp, feel free to email me!

Please complete and submit registration forms and tuition payments to reserve a spot for your camper to Sikeston Little Theatre Drama Camp 2023! Details of submission can be found on the form.

My team and I are very excited to work with these young artists and give them a fun-filled week while they enjoy just some of the wonderful things theatre and SLT has to offer!

Best Regards,

Cody Smither

SLT Camp Dean

smither.cody12@gmail.com



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Registration Form

June 5th - 10th

9am - 12pm

This program is for Kids going into grades 3-7 in Fall 2023

Child Information

First Name _____ Last Name _____

T-shirt size _____

Birth date ____/____/____ Age _____

School Name _____ Grade (Going into Fall 2023) _____

Street Address _____

City _____ State _____ Zip code _____

Child lives with: _____

Person responsible for payment _____

Parent/Guardian - Contact Information

Parent/Guardian #1

First _____ Last _____

Street Address _____

Town/City _____ State _____ Zip code _____

Home Phone _____ Work Phone _____

Cell Phone _____

E-mail _____ Occupation _____

Employer _____

Parent/Guardian #2 (If Applicable)

First _____ Last _____

Street Address _____

Town/City _____ State _____ Zip code _____

Home Phone _____ Work Phone _____

Cell Phone _____

E-mail _____ Occupation _____

Employer _____



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Emergency Contact Information - Alternate Pickup/Release

Emergency Contact #1

First Name _____ Last Name _____

Home Phone _____

Cell Phone _____ Email _____

Relation to Child _____

Emergency Contact #2

First Name _____ Last Name _____

Home Phone _____

Cell Phone _____ Email _____

Relation to Child _____

Please list the people in addition to parents/guardians who are permitted to pick up your child:

1: _____ 2: _____

3: _____

Medical Information

Please list any medical problems, including any requiring maintenance (i.e. Diabetic, Asthma, Seizures)

<u>Medical Problem</u>	<u>Required Treatment</u>	<u>Should paramedic be called?</u>
_____	_____	Yes/No
_____	_____	Yes/No
_____	_____	Yes/No

Is your child presently being treated for an injury or sickness, or taking any form of medication for any reason?

Yes ___ No ___

If yes, explain: _____

Is your child allergic to any type of food or medication?

Yes ___ No ___

If yes, explain: _____



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Does your child require a special diet?

Yes ___ No ___

If yes, explain: _____

The purpose of the above listed information is to ensure that SLT personnel have details of any medical problem which may interfere with or alter treatment.

SUMMER CAMP TUITION AND PAYMENT

A tuition fee of \$30 will be put towards camp supplies, shirts, costumes, and food.

Summer camp tuition fee is due by Sunday, April 30th either by cash or check (made payable to Sikeston Little Theatre).

A Camp Administrator will be in the Sikeston Little Theatre Lobby every Sunday, starting on March 5th, from 2pm-4pm collecting registration forms and tuition payments.

If a camper's registration form is not submitted or tuition is not paid, they will not be able to attend camp.

This is to ensure Camp Admin. can have the proper supplies (scripts, shirts, costumes, props, food, etc.) available before camp starts.

The financially responsible party signing this form understands and agrees to the Tuition Payment and Fees Policy.

Terms of Agreement

I hereby state that (Camper) _____ is in good mental and physical health condition to participate in the activities provided by Sikeston Little Theatre including but not limited to all aspects of theater, acting, vocal, emotional, and stage combat training. I am fully aware that any activity involving motion, height or athletic activity creates the possibility of serious injury. I hereby release Sikeston Little Theatre and its volunteer staff from liability to the above named activities, of the person claiming through him/her, arising from injury to the person or property of the above named Camper occurring on the premises of Sikeston Little Theatre including any event sponsored or sanctioned by Sikeston Little Theater Drama Camp and or travel to and from such activities. I understand that Sikeston Little Theatre Summer Drama Camp Administration has the right to deny admittance to any student not meeting the standards of the program as it sees fit. I also agree not to hold these parties responsible in



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the event that my son/daughter/child engages in inappropriate conduct (including, but not limited to disruptive or volatile behavior in or out of camp, etc.) or becomes involved in any activity or with any persons not associated with Sikeston Little Theatre or its scheduled program and that Sikeston Little Theatre Summer Drama Camp Administration has the right to send him/her home for inappropriate conduct and that no refunds will be given. I further attest that the information contained in this application is correct to the best of my knowledge. In addition, I have agreed to the policy and fee statement and agree to comply.

I hereby give permission for my child to be photographed/recorded during Sikeston Little Theatre Kids/Youth Summer Drama Camp. I understand the photos/recordings will be used to keep a journal of activities, to share during presentations and/or reports and for promotional purposes including flyers, brochures, newspapers and on the internet. I understand that although my child's photograph/recording may be used for advertising, his or her identity will not be disclosed. I do not expect compensation and that all photos/recordings are the property of Sikeston Little Theatre Kids/Youth Drama Camp and its affiliates.

Sikeston Little Theatre and its co-organizers are not responsible for lost or damaged personal property. All scheduled events are subject to change. I understand that no fees will be refunded or transferred unless a child is unable to participate due to an accident or illness per physician orders. Childrens' photos and quotes may be used for publicity purposes. In case of an emergency, and if a family physician cannot be reached, I hereby authorize my child to be treated by Certified Emergency Personnel (i.e. EMT, First Responder, and/or Physician).

Camper Name: _____

Camper Signature: _____ Date: _____

Parent/Guardian Name: _____

Guardian Signature: _____ Date: _____