Student name	
Cast as	

## LLT Kids' Camp Registration Form 2015



CAMP DATES: May 28<sup>th</sup> – June 5<sup>th</sup> from 1 to 5 PERFORMANCES: June 5<sup>th</sup> @ 7 pm, June 6<sup>th</sup> @ 4 pm and 7 pm & June 7<sup>th</sup> @ 2 pm

Laurel Little Theater Kids' Camp is open to students entering grades 1 – 9 for the 2015 – 2016 school year. The cost of the workshop this year is \$90. Families with more than one student may get an additional 10% discount. We will have a total of 115 campers, so please get your registration in ASAP to be assured of a place in the camp.

To reserve a place for your child, please complete this form and mail your check or credit card information to <u>Laurel Little Theater, P.O. Box 2131, Laurel, MS 39442.</u> If you have multiple children to register, you may write one check, but you will need to complete a registration form for EACH child. Early auditions will take place on Sunday, May 3<sup>rd</sup> at 4 and Monday, May 4<sup>th</sup> at 5:30. This audition is for lead roles ONLY: Aladdin, Princess Jasmine, Genie, Jafar, lago, Magic Carpet, The Sultan and Razoul.

Once registered, you'll receive all the camp info by email during the month of May, and you'll also get a packet in the mail that will contain several camp related materials, including a rehearsal CD, so that campers can learn the songs BEFORE camp begins. In order to assure that the email reaches you and does not go to spam, please add this email address to your list of contacts, <a href="mailto:AngieDHodge@yahoo.com">AngieDHodge@yahoo.com</a>. If you have NOT received your packet from Laurel Little Theater or Mrs. Angie Hodge, the camp director, by <a href="mailto:May 15th">May 15th</a>, please contact the camp director via email at <a href="mailto:AngieDHodge@yahoo.com">AngieDHodge@yahoo.com</a>.

STUDENT'S NAME					<u></u> -	AGE	GRADE NI	EXT FALL	
STUDENT'S SCHOOL						Male / I	emale (circle or	ie)	
T-SHIRT SIZE: (Circle One) *A free cast t-shirt is include			AS egistrat	AM ion.	AL	AXL			
Additional shirts are \$10 each the size(s) that you need and									
YS YM	YL	AS	<u> </u>	AM		AL	AXL	AXXL	
PARENT		0	AN WE	COUNT	ON YOU	TO HELP D	URING CAMP? (cir	cle one) YES / NO	
MAILING ADDRESS (street/p.o. box)						state)	ZIP		
EMAIL ADDRESS									
PHONE (home)	ome) (cell)					(work)			
LIST ANY SIBLINGS THAT AR	E REGISTERING FO	OR CAMP.					CAMP FEE		
							EXTRA T-SHIRT _		
							TOTAL PAID		
□ CHECK #			□ CASH			□ CARD	TYPE Discover, I	MasterCard, Visa	
CREDIT CARD#									
NAME (as appears on card)									
EXPIRATION DATE					S	FCURITY CO	DF		