



Great Lakes Theater Camp Registration Form

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Please email registration forms to kflorian@greatlakes theater.org or mail to Kelly Schaffer Florian, 1501 Euclid Ave., Suite 300, Cleveland, Ohio 44115.

New camp location! **Brook Park Elementary School**, located at 17001 Holland Road, Brook Park, Ohio 44142

Camp dates: Mondays-Thursdays (no Fridays), June 10-20, 2024

Student Name: _____ Birth date: ____/____/____ Age at time of camp: _____

Parent/Guardian Name: _____

Contact phone #1 _____ ☐ cell ☐ home ☐ work

Contact Phone #2 _____ ☐ cell ☐ home ☐ work

Address: _____

City: _____ Zip: _____ Email: _____



Camper's T-shirt size: ☐ YS ☐ YM ☐ YL ☐ AS ☐ AM ☐ AL ☐ AXL

(late registrants are not guaranteed a t-shirt)



Check camp selection below:

☐

Groundlings, Ages 6-8
9:30 am—12:00 pm, \$256

☐

Upstart Crows, Ages 12-13
9:30 am — 3:00 pm, \$360

☐

Jesters and Fools, Ages 9-11
9:30 am — 3:00 pm, \$360

☐

Rude Mechanicals, Ages 14-17
9:30 am — 3:00 pm, \$360



Need your camper to arrive at camp early or stay late? We've got you covered!

☐

Before Camp Care: 8:30-9:30 am, M-Th, \$40/week (4 days, may be prorated)

☐

After Camp Care: 3:00—4:00 pm, M-Th, \$40/week (4 days, may be prorated).

\$ _____ TOTAL DUE - Due at time of registration: please enclose at least 50% of your total payment (per child).
Full payment will also be accepted.

Your balance is due **May 9th**. If you should decide to cancel prior to May 9th you will receive a refund minus 20% of your camp week's total.

☐

Check payable to Great Lakes Theater enclosed:

\$ _____ Check # _____

☐

Credit card: Visit greatlakes theater.org/event/camptheater to pay by credit card online. Available for half and full payments.

MEDIA RELEASE: I give my permission for Great Lakes Theater to take and use: photographs and/or digital images or recordings of me, possibly including name and identity, for use in news releases, publicity and promotions and/or educational materials. I authorize the use of these images without compensation to me and release GLT from any liability for violation of any personal, privacy, or property rights which I might have in connection with the use of the photograph or recording.

X _____
Parent/Guardian (if under 18 years)

_____ Date

Method by which you learned about Great Lakes Theater Camp: _____



Great Lakes Theater Camp Medical Authorization Form

Child's Name _____ Birthdate _____

Parent's Name _____ Phone #1 _____

Phone #2 _____

Parent's Name _____ Phone #1 _____

Phone #2 _____

Additional persons who can be called in an emergency:

Name _____ Phone _____

Relationship _____

Name _____ Phone _____

Relationship _____

Physician to be called in an emergency:

Name _____ Phone _____

Address _____

Dentist to be called in an emergency:

Name _____ Phone _____

Address _____

Medical insurance information:

Insurance Company _____

Group Name/Plan Number _____

Allergies or other helpful medical or special needs information:

Permission for medical treatment: Administrative procedures vary among medical personnel and medical facilities with regard to provision of medical care for a child in the absence of the parent. The exact procedure required by the physician or hospital to be used in emergencies should be verified in advance. In case of accident or emergency, I authorize my child's caregiver or other authorized adults to take my child to the above-named physician or to the nearest hospital for emergency treatment. I authorize the administration of measures as are deemed necessary for the safety and protection of the child.

Parent's signature

Date



Great Lakes Theater

Camper Behavior Contract

Behavior Expectations:

1. Camp is about fun, exploration and growth. Respect for all in this process is the basic expectation.
2. Campers will always treat everyone in at camp with respect and show respect for others' personal belongings, privacy, and feelings.
3. Campers will remain with their camp teachers, follow directions, and abide by camp rules.
4. Campers will not be involved with smoking, alcohol use, illegal drugs, weapons, vandalism, theft, or any other illegal behavior.
5. Campers will use appropriate language; profanity will not be tolerated.

Great Lakes Theater Camp has a NO TOLERANCE POLICY for violence, aggression, and threatening language. Under the circumstances below, campers will be removed from camp immediately, with the potential for this removal to be extended to camp in future years or indefinitely.

Unacceptable Behaviors:

1. Discrimination of another camper/staff member, or anyone, based on race, sexual orientation, religion, age, gender identification, national origin, or handicap
2. Physical fighting or violence toward another camper or staff member
3. Use/possession of illegal substances or materials intended for the use of illegal substances (drugs, alcohol, tobacco, etc.)
4. Verbal misconduct toward another child or staff member
5. Possession of firearms or weapons of any kind
6. The use of obscene, profane, or vulgar language
7. Any action that puts the safety of themselves, fellow campers, or staff at risk
8. Secretly recording or photographing any individual at camp
9. Bullying behavior intended to intimidate, humiliate, demean, harass, or embarrass campers or staff
10. Inappropriate physical contact with other campers and staff

Failure to follow these expectations will result in an unsafe or unenjoyable atmosphere for you and others in the camp. Should that happen, the following consequences may occur: Consequences Depending on the severity of the situation or if the behavior persists, one or more of the following consequences will be taken.

1. Camp Directors will discuss behavior with the camper.
2. Camp Directors will discuss the behavior with the parent/guardian.
3. The child will be sent home immediately for the day.
4. In extreme cases child will be sent home and not allowed to return to camp.
5. NOTE: There are no refunds when a child's behavior requires he/she be sent home.

I have read and understand the above Camper's Behavior Contract and agree to follow these policies during my participation in the Great Lakes Theater Camp program. I understand that should I fail to comply with these policies; the consequences as stated above will apply.

CAMPER'S SIGNATURE: _____ DATE: _____

SIGNATURE OF PARENT: _____ DATE: _____