



# 2022-23 STC CAMPS REGISTRATION FORM

For students 8 to 12 years of age \*PLEASE PRINT

Please check one:  New student  Returning student

NAME OF STUDENT: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ AGE (Sept/22): \_\_\_\_\_ GRADE (Sept/22): \_\_\_\_\_ M/F: \_\_\_\_\_

Parent/Guardian: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Parent's email: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_ Business: \_\_\_\_\_

Please select your class(es) below, along with the session(s) of your choice where applicable

\*Fees listed beside each program option indicate the cost per session.

\*DISCOUNTS: Book more than one session and save \$20 on each additional session or student booked.

2022 SUMMER THEATRE CAMPS	TIME	DATES	FEE (per term)	TOTAL FEES
<input type="checkbox"/> Drama Camp 1 (ages 8 to 12)	9 am - 4 pm	July 4-8, 2022	Regular: \$275 (\$243.36+HST) Academy member: \$255 (\$225.66+HST)	_____
<input type="checkbox"/> Musical Theatre Camp 1 (ages 8 to 12)	9 am - 4 pm	July 11-15, 2022	Regular: \$275 (\$243.36+HST) Academy member: \$255 (\$225.66+HST)	_____
<input type="checkbox"/> Drama Camp 2 (ages 8 to 12)	9 am - 4 pm	Aug 8-12, 2022	Regular: \$275 (\$243.36+HST) Academy member: \$255 (\$225.66+HST)	_____
<input type="checkbox"/> Musical Theatre Camp 2 (ages 8 to 12)	9 am - 4 pm	Aug 15-19, 2022	Regular: \$275 (\$243.36+HST) Academy member: \$255 (\$225.66+HST)	_____
<b>2023 MARCH BREAK CAMP</b>				
<input type="checkbox"/> March Break Camp (ages 8 to 12)	9 am - 4 pm	Mar 13-17, 2023	Regular: \$275 (\$243.36+HST) Academy member: \$255 (\$225.66+HST)	_____

**AFTER-CARE** Our full-day camps end at 4 pm each day. Arrangements can be made for late afternoon pick-up, for an additional \$10 per day. Please circle the dates below that your child will require late pick-up.

Yes, my child will require late pick-up on these days that week (circle) **M T W Th F** \$10 per day

\*If you're not sure, you may arrange this closer to the date of the camp.

PLEASE NOTE: If you are a NEW student who was referred to STC by another student or parent, please provide the name of the person who provided this referral. \_\_\_\_\_ **TOTAL** \_\_\_\_\_

Would you like to receive e-mail information about other Sudbury Theatre Centre programs? **YES NO TOTAL FEES** \_\_\_\_\_

### FOR OFFICE USE ONLY

DATE PAYMENT RECEIVED: \_\_\_\_\_

Method of Payment: CASH / CHEQUE / VISA / MASTERCARD / AMERICAN EXPRESS / OTHER \_\_\_\_\_

Name on Cheque: \_\_\_\_\_

Credit Card No.: \_\_\_\_\_ 3-digit Card ID: \_\_\_\_\_ Expiry: \_\_\_\_\_ / \_\_\_\_\_