	Campcausewelovetoact pres	sents
	SHAM*ROCK II	I
Рег	forming Arts Workshop – JU West T. Hill Community Th And UPLIFT of Northern II	eatre
\$150 Check one:	per Student per week - \$100 per additional Si Session I – July 16-20 Session II – July 23-27	<sup>bling per week</sup> Both Sessions (If Available)
NAME:		
	BOYGIRLAG	0
ADDRESS:_		
TELEPHON	NE NUMBERS:	

E-MAIL:

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T-SHIRT SIZE: CHILD:	S ADUL	Л: 8
(Check one)	Μ	Μ
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To the Parent or Guardian: During the time your child is at the Uplift Workshop, photos and videos may be taken for promotional and general purposes to include external and internal publication and Uplift and West T. Hill Community Theatre websites. Do we have permission for your son or daughter's photograph to be taken and used as indicated?

I promise to see that my child attends all rehearsals and shows on time, or has a legitimate excuse for which I will give prior notice.

No

(Check one) Yes

Signature or Parent or Guardian:\_\_\_\_\_\_ (For office use only:) DATE OF REGISTRATION:\_\_\_\_\_\_ PAID:\_\_\_\_\_ CASH/CHECK#\_\_\_\_\_BY:\_\_\_\_\_