



MAIL TO:
 South Shore School of Theatre
 Eastern Nazarene College
 Cove Fine Arts Center
 23 E. Elm Avenue * Quincy, MA 02170

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SUMMER VACATION 2020 Registration Form

Child's Name: _____ M ___ F ___ Non Binary ___ Age: _____

Address: _____ City: _____ Zip: _____

Parent/Guardian 1: _____ Parent/Guardian 2: _____

Phone(s): _____ Phone(s): _____

Email: _____ Email: _____

Emergency and Medical Information

In case of emergency, contact: (name/phone): _____

List any specific medical conditions our staff should be aware of: (allergies, diabetes, autism, disabilities, etc.) _____

Physician (name/phone): _____

Permissions Needed

(please initial next to each permission you grant)

___ Photos may be used of my child for publicity purposes ___ My child may leave campus for dinner (teens only)

___ Please order a summer show t-shirt for my child: (\$20)

___ Child S ___ Child M ___ Child L ___ Adult S ___ Adult M ___ Adult L ___ Adult XL

Program Choices

(please check appropriate boxes)

___ **Session One Musical**, ages 7-13 (\$800)

July 8-July 25, 2020

___ **Session Two Musical**, ages 7-13 (\$800)

July 13-August 1, 2020

___ **Session 1 & 2 Extended Day**, (\$25/wk)

Week1 ___ Week2 ___ Week3 ___

___ **Teen Musical**, ages 13-19 (\$800) *July 13 -*

August 8, 2020

___ **Audition Workshop**, ages 7 & up

(\$60/day) *June 29-July 3*

Mon ___ Tues ___ Wed ___ Thurs ___ Fri ___

___ **Teen Internship**

Must fill out separate internship application

Payment Information

(please check appropriate boxes)

Deposit only enclosed ___

(\$100 deposit required to reserve your child's spot, non-refundable after May 1)

Full payment enclosed ___

Sibling Discount ___

(10% off each additional sibling)

Early Bird Discount ___

(\$25 off, must be postmarked by 2/16)

Request for payment plan ___

T-Shirt (\$15) ___

Referral Discount (\$25/child, please list name of child who referred you and they receive \$25 of their tuition) _____

Please make checks payable to:

South Shore School of Theatre