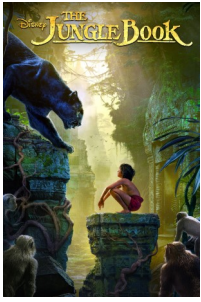


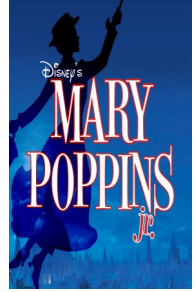
COHS Summer Theatre Camp 2020 Registration Form

COHS is pleased to announce our new Summer Theatre Camp for 2020. We will be offering two sessions, *Jungle Book* for ages 7-12 and *Mary Poppins Jr.* for ages 12-18. Space is limited, sign-up today!



Please complete the form and return to:

COHS Summer Theatre Camp
39 O'Hara Rd.
Tonawanda, NY 14150



*Please check which camp you are registering your child for.
Please complete one form per child you are registering.*

Jungle Book: July 6th-July 24th, Monday-Friday 9am-3pm
Performances: July 23rd/24th at 7pm

~or~

Mary Poppins Jr.: July 27th-August 14th, Monday-Friday 9am-3pm
Performances: August 13th/14th at 7pm

Student Name: _____ Gender: _____ Birthdate: ____/____/____

Home Address: _____

Grade entering in Fall 2020: _____ School: _____

Parent Name: _____ Phone #: _____

E-mail: _____

Emergency Contact: _____ Emergency Phone #: _____

Special needs or medical conditions: _____

I give my child permission to attend and participate in the COHS Summer Theatre Camp. I have informed COHS of any special needs or accommodations for my child. I understand that, although uncommon, sometimes dancing and other theatrical activities may result in injury, and I hereby personally, without reservation, waive COHS, its staff and directors, from any and all suits or claims of liability, injury, or any such damages.

I give COHS permission to take photographs of my child to use for promotional material.

Payment Information:

The cost is \$400 per camper with a \$100 non-refundable deposit required to reserve your spot. Pay your tuition in full by February 29, 2020 and receive the discounted cost of \$375. Final payment will be due March 31, 2020.

Cost of camp after April 1, 2020 will be \$425.

Pay Online– www.cardinalohara.com/about-us/donate/ (choose Theatre Camp under the drop down menu)

Pay by Check– Make checks payable to COHS and send with registration form.

Pay with Credit Card– Visa or Mastercard

Name on Card _____

Card Number _____ Exp. ____/____ CVC _____