Page 1/3



# **Great Lakes Theater Camp Registration Form**

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

Camp location: Brook Park Elementary School, located at 17001 Holland Road, Brook Park, Ohio 44142

Camp dates: Mondays-Thursdays (no Fridays), June 9-19, 2025

Student Name:	Birth date:// Age at time of camp:
Parent/Guardian Name:	Grade student is entering:
Contact phone #1	cell home work
Contact Phone #2	cell home work
Address:	
City: Zip:	Email:
Camper's T-shirt size: YS (late registrants are r	YM YL AS AM AL AXL not guaranteed a t-shirt)
✓ Check camp selection below:	
<b>Jesters and Fools</b> , grades 4-6 9:30 am — 3:00 pm, \$375	Rude Mechanicals, grades 10-12 9:30 am — 3:00 pm, \$375
Upstart Crows, grades 7-9 9:30 am — 3:00 pm, \$375	
Before Camp Care: 8:30-9:30 am, M-	p early or stay late? We've got you covered! Th, \$40/week (4 days, may be prorated) Th, \$40/week (4 days, may be prorated).
\$ TOTAL DUE - Due at time of regis Full payment will also be accepted.	tration: please enclose at least 50% of your total payment (per child).
Your balance is due <b>May 9th.</b> If you should decide to cayour camp week's total.	ancel prior to May 9th you will receive a refund minus 20% of
Check payable to Great Lakes Theater enclose \$ Check #	
Credit card: Visit greatlakestheater.org/event/c full payments.	camptheater to pay by credit card online. Available for half and
ecordings of me, possibly including name and identity, for educational materials. I authorize the use of these image	s Theater to take and use: photographs and/or digital images or or use in news releases, publicity and promotions and/or es without compensation to me and release GLT from any liability hich I might have in connection with the us of the photograph or
( Parent/Guardian (if under 18 years)	 Date
Method by which you learned about Great Lakes Theate	



### Great Lakes Theater Camp Medical Authorization Form

Child's Name	Birthdate
Parent's Name	Phone #1
Talents Name	Phone #2
Parent's Name	Phone #1
	Phone #2
Additional persons who can be called in an en	nergency:
Name	Phone
Name	Phone
Relationship	
Physician to be called in an emergency:	
	Phone
Address	
Dentist to be called in an emergency:	Phone
Medical insurance information:	
Group Name/Plan Number	
Allergies or other helpful medical or special ne	eeds information:
Permission for medical treatment: Administrative facilities with regard to provision of medical care for required by the physician or hospital to be used in cident or emergency, I authorize my child's careginal careg	ve procedures vary among medical personnel and medical or a child in the absence of the parent. The exact procedure emergencies should be verified in advance. In case of acver or other authorized adults to take my child to the above nergency treatment. I authorize the administration of y 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:	