

CCT Junior Theater Camp 2017

July 10-14th, 2017

9 AM-3 PM

Open to Ages 7-14
(must be 7 by July 1st)

\$25 per student,
max of \$50 per family

* Includes lunch each day,
snacks, and t-shirt

For Questions or More
Information,
Contact Nikki Schubert
(712) 369-1383
nschubert76@gmail.com

Campers will attend
breakout sessions taught by

CCT Volunteers in the morning, learning a variety of skills including but not limited to: set building, how to audition, costume creation, characterization, & choreography and many more. In the afternoon, we'll switch gears and work on getting our One Act plays ready for performance!

CCT Junior Show Performance
Friday, July 14th, 2017 @ 7PM

Registration Forms due by June 20th!

Forms can be turned into the Parks and Rec Office @ the Community Center
Or mailed to: Nikki Schubert, 604 West Main St, Cherokee, IA 51012
Or emailed to: nschubert76@gmail.com

REGISTRATION FORM - Form due by June 20th

NAME: _____ Size T-shirt: _____
 Telephone _____ Cell Phone _____
 Address: _____
 Age: _____
 Parent/Guardian Name: _____
 Parent/Guardian Name: _____
 Email: _____
 Best Way to Contact during Camp Week: _____
 Allergies: _____
 Have you attended CCT Jr. Camp before No Yes
 How many theater productions have you been in? _____
 What conflicts would you have during camp week:

| Monday, July 10 | Tuesday, July 11 | Wednesday, July 12 | Thursday, July 13 | Friday, July 14 |
|-----------------|------------------|--------------------|-------------------|-----------------|
| | | | | |

Parent/Guardian Agreement:

I agree that I will make every effort possible to have my child at all classes/rehearsals. I further understand that two unexcused absences will result in my child being eliminated from the cast. I am also aware that the Cherokee Community Theater Junior Program will be enforcing the Zero Tolerance Policy in regards to bullying that is already being enforced by the Cherokee Community Schools.

Signed: _____

As a parent or guardian of this student, I hereby consent to the use of photographs/videotape taken during the course of the camp for publicity, promotional and/or educational purposes (including publications, presentation or broadcast via newspaper, internet or other media sources). I do this with full knowledge and consent and waive all claims for compensation for use, or for damages.

Parent Signature: _____ Date: _____

Would you be willing to volunteer to help out with the camp? Yes No
 If yes, in what capacity and which day would work best?

Serving Lunch/Snacks Monday/Tuesday/Wednesday/Thursday/Friday

Monitoring Rooms

Chauffer