

COASTER THEATRE EDUCATION
DEPARTMENT PRESENTS

2018 SUMMER CAMP



CAMP THEME

RETURN TO OZ

DATES: July 30 — August 10

TIME: 10:00am - 4:00pm

WHO: Ages 8 & up

COST: \$275

(Scholarships Available)



For more information on the camp visit coastertheatre.com/coaster-kidz or contact the Coaster Theatre at 503-436-0609 or email executive_director@coastertheatre.com

TO REGISTER FOR A CAMP OR CLASS, please fill out the form below and mail it with your check, payable to "The Coaster Theatre," to PO Box 643, Cannon Beach, OR 97110, or drop it off at the box office at 108 N. Hemlock Street, Cannon Beach, OR, Wed.-Sat., 1-5pm. Camps and classes will not be held and refunds will be given if the minimum enrollment is not met. Camps and classes will meet at the Coaster Theatre. **REFUND POLICY:** Full refunds, less a \$10 service fee, will be given up to 3 weeks before the start of a camp or class. From 3 weeks until the start of camp or class a 75% refund will be given. No refunds are given after the start of a camp or class (No refunds will be issued for not being cast in your desired role). **MEDICAL CONSENT AND RELEASE FROM LIABILITY AND INDEMNIFICATIONS:** I (as signed at the bottom of this form), as parent/guardian of the named registered child, do hereby authorize employees of the Coaster Theatre to consent to emergency medical or dental examination, treatments, etc., to be administered to the same in the event of accident or sudden illness during a camp or class. In addition, I agree that I am responsible for the said participant's transportation to and from camp or class. I hereby release and discharge the Coaster Theatre, its officers, agents and employees from any and all claims for personal injuries. I also agree that pictures taken during camps or classes may be used for future promotional purposes. The Coaster Theatre does not provide any medical insurance.

CAMPER NAME _____ AGE _____ GRADE _____

PARENT(S)/GUARDIAN _____

ADDRESS _____

CITY/STATE/ZIP _____

HOME PHONE _____ CELL PHONE _____ WORK PHONE _____

PARENT/GUARDIAN SIGNATURE _____

PARENT/GUARDIAN EMAIL _____