



# DOUGLASS THEATRE'S STAGEWORKS SUMMER THEATRE CAMP

[AGES 7-14 -- 6-Week Camp]

June 5 < through > July 14

Monday-Friday: 9am to 3pm (drop-off at: 8:30am)

Registration fee is \$15 - Due with application

Weekly camp fee: \$60

Stageworks Summer Theatre Camp provides an inspiring and hands-on camp experience that is aimed at enriching the cultural foundation of youth. The camp introduces and trains youth in, and through, varying artistic and theatrical methods. Youth will be engaged and learn:

- basics of stage presence and strengthening his/her self-esteem
- artistic skills of acting, singing, and dancing
- art of communication, along with life lesson skills, which are taught by professionals
- technical skills of coordinating lights, sound, set changes and cues from backstage

The Douglass Theatre's Stageworks Summer Theatre Camp is an affordable, unique, and valuable resource for our community's youth. The camp culminates with youth producing their own theatrical production the final week.

**APPLICATION DEADLINE THURSDAY, JUNE 1, 2023**

**Please return application along with registration fee to:**

**Douglass Theatre, 355 Martin Luther King, Jr. Blvd  
Macon, Georgia 31201**

**For questions: 478-742-2000 or Email: [info@douglasstheatre.org](mailto:info@douglasstheatre.org)**

## CAMP APPLICATION

Name \_\_\_\_\_ Age \_\_\_\_\_ Birthdate \_\_\_\_\_ Male \_\_\_\_\_ or Female \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Parent(s)/Guardian (s) Name: \_\_\_\_\_

Phone # \_\_\_\_\_ Email \_\_\_\_\_

Parent(s)/Guardian(s) Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Contact name, in case of emergency \_\_\_\_\_ Phone # \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

List any medical conditions and/or allergic reactions that your child(ren) suffers (give details please): \_\_\_\_\_  
\_\_\_\_\_

Are there any special instructions, due to health reasons, concerning your child? If yes, please explain:  
\_\_\_\_\_  
\_\_\_\_\_

Are you interested in receiving a possible scholarship for your child, that would either reduce/subsidize the cost or cover the full cost for a child to attend camp based on eligibility and certain factors/criteria. Please note: scholarships are limited.

YES NO

Would you need Aftercare Services (3pm-5pm), which parents may pick-up their child by 5pm -vs- 3pm. Cost \$25/week.

YES NO

How did you hear about Stageworks Summer Theatre Camp at the Douglass? \_\_\_\_\_

BY SIGNING BELOW, I UNDERSTAND THAT I AM GIVING CONSENT FOR THE ABOVE NAME CHILD TO PARTICIPATE IN THE DOUGLASS THEATRE'S STAGEWORKS SUMMER THEATRE CAMP. I AM AUTHORIZED, AS THE CHILD'S PARENT OR GUARDIAN, TO GIVE SAID CONSENT.

\_\_\_\_\_  
PARENT OR GUARDIAN SIGNATURE

\_\_\_\_\_  
DATE

**DOUGLASS THEATRE'S  
STAGEWORKS SUMMER THEATRE CAMP**

**[AGES 7-14 -- 6-Week Camp]  
June 5 -through- July 14  
Monday-Friday 9am to 3pm**

**COVID SAFTEY & GUIDELINE WILL BE STRICLY FOLLOWED**

The Douglass Theatre remains committed to supporting the health and safety of our families and children by following CDC guidance to give you peace of mind while your child is attending summer camp.

**RELEASE OF LIABILITY**

I give my authorized consent for my child(ren)\_\_\_\_\_ to participate in the Douglass Theatre's Stageworks Summer Theatre Camp. I expect and understand that all Douglass Theatre personnel will be responsible for providing the best care, protection, supervision and guidance for my child/children as is possible while engaged in this course. However, by signing below, I understand and agree that I am releasing the Douglass Theatre, the Douglass Theatre Board of Directors, the Douglass Theatre employees, camp instructors and volunteers of liability for injuries caused by accidents or otherwise, and will not name them as a defendant in any lawsuit for any reason whatsoever.

---

**Parent's Signature**

---

**Date**