

# THEATRE ARTS ACADEMY 2020 REGISTRATION

Mail To: 1409 National Park Drive Manteo, North Carolina 27954

Or Fax (with credit card information) to: (252) 473-4288

Phone: (252) 473-2127 Website: <u>www.thelostcolony.org</u>

### 10 day camp experience ending with a performance for friends and family.

Ages	Camp Dates / Times	Performance / Showcase Dates
13 – 17 years old	July 27 – July 31, 9:00am – 3:00pm August 3 – August 7, 9:00am – 3:00pm	Showcase: Friday July 31 @ 3:00pm Performance: Friday August 7 @ 3:00pm

#### CAMP FEE: \$400.00 per camper, per session

- Fee includes all activities, snacks, 1 T-shirt, and ticket voucher for camper to attend a 2020 performance of *The Lost Colony*.
- Fee includes \$45 non-refundable registration fee due with completed registration form. Balance due no later than first day of camp.

#### **DISCOUNTS AVAILABLE:**

- Early Bird Pay Camp fee in full prior to April 24, 2020 = Save \$25.00 per camper
- RIHA Members = Save \$10.00 per camper (cannot be combined with Early Bird Discount)
- Sibling Applies only to second and third registrations = Save \$25.00 per additional child

**LOCATION:** Camp is conducted in and around the facilities at the Waterside Theatre and the Lost Colony Building located in Fort Raleigh National Park in Manteo, North Carolina.

**ARRIVAL AND DEPARTURE:** Campers should arrive daily between 8:45 AM and 9:00 AM. Campers should be picked up between 3:00 PM and 3:15 PM. **Campers must be picked up no later than 3:20 PM.** 

WHAT TO WEAR / BRING: All articles should be marked with the camper's name (including shoes!)

Non-perishable bag lunch, Bug Repellent, Sunscreen, Comfortable clothes, Closed Toe Shoes (no flipflops)

Camp staff cannot be responsible for campers' clothing, belongings or equipment. Campers should not bring jewelry, money, or non-essential articles of value. Radios, TV's, and **cell phones are not permitted**.

**CAMP PERFORMANCE**: Performances take place on both Fridays during the camp <u>Friends and family are welcome</u>. Performance details will be emailed during camp session.

REGISTRATION: Submit completed application via mail to The Lost Colony Theatre Day Camp, 1409 National Park Drive, Manteo, NC 27954 or via fax (252) 473-4288 or via email to <a href="Lost Colony.org">Lost Colony.org</a>. All registrations must include a \$45 non-refundable deposit for each session which will be applied to the session fee. Balances are due no later than the first day of the session. All major credit cards are accepted or make checks payable to Roanoke Island Historical Association. A \$35 processing fee will be charged for all returned checks. There are a limited number of slots for this camp. Slots are filled based on receipt of registration and deposit. Applications are accepted in the order they are received. Should your application be received after capacity is reached, you will be notified that your child's name has been placed on the waiting list. The deposit of an applicant on the waiting list is processed only when a space becomes available in camp. Within two weeks each camper will receive an acknowledgment his/her application has been received. If you do not receive confirmation within two weeks, please contact *The Lost Colony* office.

**CANCELLATIONS AND REFUNDS:** A written statement must accompany cancellation. Any due refund may take up to 30 days from receipt of the written cancellation notice. Camp fees are not discounted when campers arrive late or leave early except for withdrawal due to illness or accident. In case of dismissal from camp, there are no refunds.

For additional information or questions, please contact The Lost Colony business office.



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### <u>CAMPER INFORMATION</u> – one camper per registration form please

Name		Preferred Name				
Male	Female	Age	Date of Birth_			
Mailing Address _						
City	State	Zip Code				
Medications / Alle	rgies (including dietary	) / Special Needs? No	Yes			
If Yes, please exp	lain					
Grade in Fall 2020	0	Does child enjoy sch	iool?			
•		iterests and/or Hobbies y				
	Camps before? Number of years					
Attended The Los	t Colony Theatre Day	Camp before?	Number of years			
•	,	ur child at our camp. Plea s, costumes, stage mana	ase include if your child ha agement, electrics etc)	as interest in		
T-shirt Size: sel	lect one ADULT:		um Large um Large			
PARENT/GUARDIAI	N INFORMATION					
Name(s)						
Employer(s)/ Busi	ness(es)					
Cell Phone	Other Phone					
E-mail address(es	s)					
EMERGENCY CONT	TACT INFORMATION Plea	ase provide information fo	or a local, adult (18+) eme	ergency contact.		
Name						
Relationship to Ca	amper					
Cell Phone		Other Ph	one			
E-mail address(es	s)					



## 2020 REGISTRATION ~ THEATRE ARTS ACADEMY

	TAA: July 27 - August 7, 2020	@ \$400.00	= \$ 400.00	
Select ar	ny appropriate discount (s)		·	
	<b>Early Bird</b> Paid in full prior to April 24, 2020	@ - \$25.00	= \$	
	RIHA Members Cannot be combined w/ Early Bird	@ - \$10.00	= \$	
	<b>Sibling Discount</b> Applies only to 2 <sup>nd</sup> & 3 <sup>rd</sup> registrations	@ - \$25.00	= \$	
D		TOTAL	= \$	
PAYMENT INFORMATION				
to the session fee. Pleas	<b>le</b> deposit is required for each sess se pay by check or credit card. All be will be charged for returned checks	alances are du		
Check #	Enclose	ed Amount \$_		
<b>o<i>r</i></b> Card Number		E:	xpiration Date	
CVC	Author	ized Amount \$	<u>i</u>	
Name on Card				
Billing Address				
City	State Zip Cod	e		
•				
Parent / Guardian Ad	<u>GREEMENT</u>			
successors and assigns from arise or may hereafter arise discharges RIHA from any illness, death, or property of RIHA, its employees, vo any responsibility for, or had disability insurance in the extreatment and unavoidable an emergency. I fully under accept all risks including the to utilize my child's photogod.  I understand that I must be establish my identity as the	er discharge and hold harmless Roanol om any liability, claims or demands of we from my child's participation with the liability or claim that I may have agains damage that may result from my child's lunteers or agents, or caused by some averany obligation to provide financial a event of injury or illness. I agree RIHA is accidents. RIHA also has my permission erstand the inherent risks involved in the lose activities preliminary and subseque raph or likeness in RIHA promotional may present the first morning of camp, from a child's parent or guardian. I understand the end of each day. I also understand the present in advance	whatever kind or in 2020 Theatre Cat RIHA with respectivities with RI other means. I use is istance, includes released from I on to use necessed activities my change in 8:45am to 9:00 and that I must signal.	nature, either in law o mps. I understand the ect to any bodily injured. HA whether caused I nderstand that RIHA ing but not limited to ability in connection wary medical measure all will be choosing on activity. Also, I give am to meet the campun my child in at the borness.	or in equity, which at this Release ry, personal injury, by the negligence does not assume medical, health, or with medical es in the event of r has chosen. I RIHA permission of staff and eginning of the
Parent / Guard	dian Signature	Child's Printed Name	Э	Date