



SONGS SUMMER CAMP

IMMERSE YOURSELF IN THE MAGIC OF BROADWAY

July 14th - 18th, 10:00am-2:00pm
\$140

STUDENT NAME: _____

AGE: _____

PREVIOUS MUSICAL
EXPERIENCE?: _____

ALLERGIES OR MEDICAL
CONDITIONS: _____

PARENT/GUARDIAN
NAME(S): _____

ADDRESS: _____

E-MAIL(S): _____

PHONE NUMBER(S): _____



SONGS SUMMER CAMP

AUDIO/VISUAL WAIVER

The Music Lesson Centre of Long & McQuade retains the right to audio/visual images and recordings it makes at "Broadway Songs Summer Camp", and may use them for promotional purposes.

Name of Camper: _____

Name of Parent/Guardian: _____

Parent Signature: _____

Date: _____

PERMISSION SLIP (OPTIONAL)

Permission to leave "Broadway Songs Summer Camp" (188 Robie Street) property unaccompanied during assigned break and lunch times.

In completing this form, I give permission for my child, _____, to leave camp accompanied during their assigned break and lunch time.

Name of Parent/Guardian: _____

Signature of Parent/Guardian: _____

Date: _____