

The Peace Theatre Company



A Summer Musical Theatre Experience for Students 5th grade and up

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**Audition Date:** June 4<sup>th</sup>     **Time:** 3:30p.m.~6:30p.m.  
**Where:** Enter through Door 3 and go to the Little Theater

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Rehearsal Dates: June 30th~July 23rd

Days: Tuesdays and Thursdays

Time: 9:00a.m.~12:00p.m.

Tech Week: On the last week, starting July 20th, we will meet every day Monday thru Thursday in preparation for the performance.

Cost: \$100.00

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**Two Show Performances:** Friday, July 24<sup>th</sup> &  
Saturday, July 25<sup>th</sup> @ 3:00p.m.

**Ticket Prices:** \$3.00

**Queen of Peace High School 7659 S. Linder Ave. Burbank, IL**

Contact Anna Reynes with questions: [reynesa@queenofpeacehs.org](mailto:reynesa@queenofpeacehs.org)

# Application to Summer Musical Theatre Camp

Student Name \_\_\_\_\_

Age of student on June 4 \_\_\_\_\_

School attending in the fall \_\_\_\_\_

Student T-shirt Size: *(please indicate one)*

Youth.....S      M      L  
Adult.....S      M      L      XL      Other\_\_\_\_\_

Student Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Parent Cell \_\_\_\_\_

Parent work phone \_\_\_\_\_

Parent email \_\_\_\_\_

Best time and method to reach parent \_\_\_\_\_

Please provide any additional information you would like us to know: \_\_\_\_\_

\_\_\_\_\_

## Audition Information:

I am hoping to be cast in the following kind of role: *(circle all that apply)*

Lead role with dialogue      Featured soloist      Chorus member      Featured dancer      Dancing chorus  
or...      crew member/non performer

I will accept any role that I am given:      Yes      No  
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**Cost: \$100.00**

**\$50.00 deposit and application due no later than April 30**

**\$50.00 balance due by May 15**

**Please make checks out to Queen of Peace High School**

**Late registrations, as space allows, require a cash payment for the full balance.**

**Please note: A minimum number of participants will determine if the camp will take place.**

**Don't delay!**

**PERMISSION FORM WITH INDEMNIFICATION/HOLD HARMLESS AGREEMENT**

I/We the parent(s)/guardian(s) of \_\_\_\_\_, a current student in good standing at \_\_\_\_\_ School, hereby consent to participation by my/our child in the Summer Musical Theatre Camp Program June 4 - July 23, 2009 at Queen of Peace High School. I/We understand that my/our child's participation in this camp is not mandatory. Queen of Peace will not admit my child to this camp unless this permission and indemnification/hold harmless agreement is completed and returned to Queen of Peace prior to the first day of camp. In consideration for Queen of Peace allowing my/our child to attend this camp, I/we hereby agree to indemnify and hold Queen of Peace High School, its officers, directors, members, employees and transporting employees, harmless against any and all claims for loss, liability, damage or injury, including attorney fees, arising out of, connected with, or resulting, in part or in whole, from my/our child's participation in this camp. Additionally, I/we hereby assign all rights, privileges and materials for reproduction to Queen of Peace High School of any and all photographs taken of our child by Queen of Peace or its recognized agents.

In order to secure your permission for your child's participation in this experience and simultaneously release Queen of Peace High School from all liability while he or she is on the school grounds, please sign below.

Sincerely,

Ms. Anna Reynes  
Fine Arts Department

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**Medical and Medication Information**

If your child has significant medical conditions or medication needs, a Parent/Guardian must contact the school at least 72 hours prior to the first day of camp to assure the supervisor will be alerted to the student's needs. *Do not send medication independently.*

**READ AND AGREED TO:**

\_\_\_\_\_  
Parent/Guardian Signature                      Date

\_\_\_\_\_  
Student Signature                                      Date

\_\_\_\_\_  
Parent/Guardian Printed Name

\_\_\_\_\_  
Student Printed Name

Reminder of allergic reactions for this student: \_\_\_\_\_