



210 NE Ford St  
McMinnville, OR 97128  
503-472-2227

# KIDS' WRITING CAMP

July 6-10, 2009

## REGISTRATION FORM

*Sibling Discount: Gallery will offer a \$10 per child discount for the 2nd and subsequent children from the same family enrolling in Summer Drama Camp.*

Student's Name \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_

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

Phone \_\_\_\_\_ Cell \_\_\_\_\_

Email: \_\_\_\_\_

**Sibling Attending?** \_\_\_ No \_\_\_ Yes, Name \_\_\_\_\_ Age \_\_\_\_\_

### Emergency Contacts:

Name \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

Name \_\_\_\_\_ Phone \_\_\_\_\_

## CAMP DETAILS

**Date:** Monday-Friday, July 6—10

**Time:** 9am to 12pm (9-11am on Friday. Those who wish may stay to see the 11 am Magic Theatre performance at Gallery.

**Ages:** 8-18

**Cost:** \$50 per person

FOR OFFICE USE	Date Application Received _____	Received By _____
	Date Payment Received _____	Received By _____
	\$ _____	<input type="checkbox"/> Check # _____ <input type="checkbox"/> Cash <input type="checkbox"/> Credit Card         { Sibling Discount }