



SUMMER MUSICAL THEATRE CAMP



GRADES K - 8

JUNE 1-5
MONDAY - THURSDAY
8:30 AM - 12:30 PM

FRIDAY
8:30 AM - 1:00 PM
1:00 PM PERFORMANCE IN
THE JCPA

QUESTIONS?
CONTACT MRS. SUSAN GARDNER
330-837-3501, EXT 1462 OR AT
SRG2JC@JACKSON.SPARCC.ORG

Jackson School for the Arts Summer Musical Theatre Camp



June 1-5

Cost \$185

Please complete one form for each student you are registering.

Student name: _____ Grade during the 20120-21 school year _____

Address: _____ City: _____

Zip Code: _____ Home Phone: _____

Shirt Size: S M L XL Adult size or Children's size (circle the size AND Adult or Children)

E-mail: _____ School you attend/District: _____

We will send all camp information from this point to this E-mail address.

You will receive emails informing you about all camp details.

Phone Numbers to reach parents during the time of camp:

Mother: _____ Phone: _____

Father: _____ Phone: _____

Other: _____ Phone: _____

Medical Information/Allergies we should be aware of during camp:

Doctor: _____ Phone: _____

_____ In the case of an emergency, I give permission for medical treatment to be sought for my child.

_____ I give permission for my child to be photographed.

(Be aware that the entire production will be recorded and distributed to the student actors in the program.)

Parent signature: _____ Date: _____

Mail to:

Mrs. Susan Gardner, JSA
Jackson High School
7600 Fulton Rd. NW.
Massillon, OH 44646

Questions?

Mrs. Susan Gardner- 330-837-3501, ext 1462
srg2jc@jackson.sparcc.org