

For staff use only: Program Fee: _____ Check #/Cash: _____ Amount Paid: _____

2025 Summer Musical Theater Arts Camp Sponsored by:
Plymouth State University- ETC, Flying Monkey and Plymouth Recreation
PROGRAM REGISTRATION FORM (One form per family per program)
Camp Dates- June 23-27 2025- Registration Fee- \$200.00

Child's Name: _____ DOB: _____ Age: _____ School: _____ Grade: _____ Sex: M F Allergies/Limitations: _____

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T-shirt size-Please circle one Youth- Sm (6-8) Med (10-12) LG (14-16) Adult- SM Med. LG XL

Parent/Guardian Name: _____ E-Mail: _____

Mailing Address: _____ Text Phone #: _____ Day Phone #: _____

2nd Parent/Emergency Contact Name: _____ Text Phone #: _____

RELEASE OF ALL CLAIMS

In consideration of the permission granted for the participant named above to take part in the above named program, I hereby release for myself and my heirs, Plymouth Recreation, Flying Monkey, Plymouth State University, its agents, employees, volunteers and other program participants from all actions, damages and claims that may result in personal injuries and property damages. I recognize there may be inherent dangers in participating in programs which may present a strain on the body and its parts, and furthermore, I represent that to the best of my knowledge the participant is in proper physical condition to allow participation. I therefore assume all risk associated with participation in said program. I understand that, in case of injury or illness, teachers will attempt to contact the parent/guardian listed above. In the event of a medical emergency, I consent to the participant's treatment by a medical doctor and I agree to pay all costs associated with said treatment, including transportation to a medical facility. I, the undersigned, have read this release and understand all its terms and implications and I hereby execute this release of my own free will and with full knowledge of its significance.

Signature (Parent/Guardian if participant is under 18)

Date

PERMISSION TO USE PHOTOGRAPHIC IMAGES

I give permission for photos or video to be taken of my child during programs for the purpose of flyers, websites, Facebook, etc.

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Yes, participant photos may be used.

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No, participant photos may not be used.

Please Email form to pmirish@plymouth.edu or Mail to:

Plymouth State University

ETC

17 High St

MSC 38

Plymouth NH 03264

Please pay registration online with the link below: Contact Pam for details 603-387-9739