



2008 NATIONAL TOUR: JACKSONVILLE

A. CAMPER INFORMATION (Please Print)

Name _____ Date of Birth _____ Male Female
Address _____
City _____ State _____ Zip _____ Home Telephone (____) _____
Parent E-mail _____ Child E-mail _____
School _____ Grade _____
Parent's/ Guardian's Name (s) _____
Cell Telephone (____) _____ Office Telephone (____) _____
Emergency Contact _____ Telephone (____) _____
Camper T-Shirt Size (circle one): Child 10/12 Child 14/16 Adult S Adult M Adult L Adult XXL

B. PROGRAM REGISTRATION INFORMATION

Summer Camp – JACKSONVILLE, FLORIDA • June 16-20, 2008 • Ages 10 - 17 • \$475.00

C. PAYMENT INFORMATION

- 1. Full Payment is Enclosed: Amount \$ _____
- 2. Deposit Enclosed: Amount \$ _____ (50%) Balance Due \$ _____ (50%)

For Deposit Payments Via Credit Card Only: I hereby acknowledge that my credit card will automatically be billed the balance of the registration fee(s) without advance notice within four (4) weeks of the program start date. I understand I can cancel this automatic payment at any time by contacting Stephanie Acosta at (904)632-3211 in advance.

Signature _____

For Deposit Payments Via Check Only: A second check for the balance is due four (4) weeks prior to the program. *No invoice or other reminder will be issued.*

- 3. Payment Method: Check* • MasterCard • Visa
Account # _____ Expiration Date _____
Billing Address _____
City _____ State _____ Zip _____
Name As Listed On Card _____
Signature _____ Date _____

PLEASE FILL OUT APPLICATION AND SEND IT WITH YOUR CHILD'S FAVORITE PICTURE TO US AT:

**FCCJ ARTIST SERIES
ATTN: KATE MCMANUS
501 W. STATE STREET, SUITE 141
JACKSONVILLE, FL 32202
OR FAX TO (904) 632-3266**

***CAMP BROADWAY® Disclaimer: Deposits** – A minimum deposit of 50% is due at the time of application. The balance of registration is due May 19, 2008 along the medical release form and sign-in/sign-out form. **Personal Checks** – Make checks payable to: *FCCJ ARTIST SERIES*. Be sure to include the Camper or Participant's name and the session(s) the check is to be applied towards. Note: A \$25 processing fee will be applied towards all returned checks. Returned checks will not be re-deposited and replacement personal checks cannot be accepted. **Refunds** – If you need to cancel after being accepted into Camp Broadway, your deposit is refundable minus a \$50.00 handling fee. Due to the extensive preparations, Camp Broadway cannot offer refunds during the program.



2008 APPLICATION FORM

Tell us a little about yourself by answering the following questions on a separate piece of paper. (If you are a returning camper, you do not need to fill out this section, unless you have new information to share with us):

1. Do you take any classes in the performing arts or play a musical instrument? Yes No
If so, describe your activities.

2. Have you ever been involved in a play or musical in your school or community theater? Yes No
If so, describe your experience.

3. What area(s) of the performing arts (e.g., performing, costume or scenery design, stage management, choreography, etc.) most interest(s) you? What do you want to learn about this area?

4. Have you ever seen a professional production of a play or musical? Yes No
If so, what show(s) have you seen?

5. What are your favorite shows and why?

6. Do you aspire to work professionally in the performing arts industry? Yes No
If so, how?

7. Why do you want to attend **CAMP BROADWAY®**?