

# IMAGINE! PERFORMING ARTS CAMP 2009

## STUDENT/ PARENT/ SPONSOR APPLICATION

Dear Parent/Guardian,

We invite your son/daughter to join us for an exciting creative arts camp to be held **Monday through Friday mornings from 9:30 to Noon, July 6 to July 31**. Students must be currently enrolled in grade 6, 7 or 8; they are expected to attend the full four weeks of the camp and to participate in the final performance showcase. Students from the Allentown School District attend free of charge with the recommendation of a teacher.

**Ensemble activities are offered in creative drama, improvisation, vocal expression, creative writing and movement.** Our goal is to help encourage young artists to respect each other as they build their self-esteem, powers of concentration and confidence. Classes are held in the performance studios in the Trexler Pavilion on the Muhlenberg College campus in Allentown (north of Cedar Beach Park). The camp is sponsored by Muhlenberg Summer Music Theatre with the generous support of local corporate and community sponsors. A chartered school bus provides free transportation from each of the Allentown middle schools to campus each day of the camp.

- ◆ Please complete the form below with your signature. Submit one form for each student.
- ◆ Enrollment is **FREE** for Allentown School District (ASD) students with a sponsor's approval.
- ◆ For students in the ASD, return this form to your child's sponsoring teacher or counselor.
- ◆ Students outside the ASD: The registration fee is \$365 for the 4-week Program. Enclose your check (made out to Muhlenberg College) and this application and mail directly to us at the address below.
- ◆ Return or postmark your application no later than June 3. Enrollment is limited.

(Please PRINT the requested information below.)

STUDENT NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ ZIP: \_\_\_\_\_

PARENT/GUARDIAN: \_\_\_\_\_

HOME/CELL PHONE: \_\_\_\_\_

A.M. EMERGENCY CONTACT: \_\_\_\_\_

A.M. PHONE/CELL: \_\_\_\_\_

SCHOOL: \_\_\_\_\_ GRADE NOW: \_\_\_\_\_ AGE: \_\_\_\_\_

FOOD / MEDICATION ALLERGIES: \_\_\_\_\_

HEALTH/OTHER CONCERNS: \_\_\_\_\_

**PARENT: I GIVE PERMISSION FOR MY SON/DAUGHTER TO ATTEND CAMP IMAGINE 2009.**

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**SPONSOR RECOMMENDATION (Print Name)** \_\_\_\_\_

Sponsor Signature: \_\_\_\_\_ Email: \_\_\_\_\_

School/Organization: \_\_\_\_\_ Date: \_\_\_\_\_

**MUHLENBERG SUMMER MUSIC THEATRE - [www.summerbroadway.org](http://www.summerbroadway.org)**

**Muhlenberg College – 2400 Chew Street, Allentown, PA 18104-5586**

*For more information about this program, call 484-664-3333.*