BOSQUE ARTS CENTER

Tin Building Theatre Camp

 $Monday, July~8-Thursday, July~31, 2024\\ For children who have completed~2^{nd}~grade~through~8^{th}~grade$

Student's Name		MaleFemale
Parent's Name		-
Address	City/St/Zip	
Home Phone:	Bus. Phone:	
Student's DOB	Student's Age	Grade Completed
Student's Interest/Hobbies	·	
Note: Performance dat	☐ Partial Day Camp — 3 \$90 per s Registration deadline is M Sorry, no refunds after F	tudent londay, June 14, 2024.
Make Check Scholarship inf	s to: BOSQUE ARTS CENTE formation available upon reque	R, P.O. Box 373, Clifton, Texas 76634 est. CALL (254) 675-3724 For More Info. WEAR OLD CLOTHES & SHOES.
	Release !	<u>Form</u>
a child under the age of eig Bosque Arts Center and agre instruction, other than injuries	hteen and I hereby give my per se to hold the Arts Center or instru s caused by gross negligence of Center or one of its instructors of	ardian of rmission for said child to take instruction from the uctors harmless from any injuries arising out of said the Arts Center. In the event of an accident and/or or employees to seek medical attention and I will
Parent or Guardian		Date
Special Instructions:(no	se bleeds, allergies, physical dis	orders, etc.)
Emergency Number(home,	work, cell)	Relationship
Physician:		Phone
Photographs including my ch may be used for publicity pur		YES NO