

REGISTRATION FORM

Print and fill out the registration form; please use one form per child.
For more info, contact Rachel at rsmith@saltworks.org or 412-621-6150 x-205.

Mail registrations to: Saltworks Theatre Co., 569 N. Neville St., Pittsburgh, PA 15213
Make checks payable to **Saltworks Theatre Company**.

ALL registration forms are due one week prior to the start of class.

Student's Name _____

Address _____

City _____ State _____ Zip _____

Age _____ Birth Date _____ Grade(2017-18) _____ Gender M F

Parent/Guardian _____

Home Phone _____ Cell Phone _____

E-mail address _____

Summer Performance Opportunity

July 9-20, Ascension Church (Oakland/Shadyside)

Cost \$200* \$ _____

Summer Camp

July 23-27, Ascension Church (Oakland/Shadyside)

Cost \$220* \$ _____

Summer Camp

July 30-Aug. 3, CCGF

Cost \$220* \$ _____

*Deduct 10% if registering before June 22

TOTAL CLASS FEES \$ _____

10% Discount for 2nd child, same family \$ _____

Tax deductible contribution to the Scholarship Fund \$ _____

TOTAL PAYMENT ENCLOSED \$ _____

Circle a T-shirt size: Youth: Small Medium Large

Adult: Small Medium Large XL XXL

If paying by credit card, please provide the following information:

Credit card number: _____

Expiration date: _____ Security code: _____

Online registration available at www.saltworks.org.

Please read the following waiver and sign if you agree.

I understand that publicity photos and/or video will be taken during the classes. I give my permission for my child to appear in future promotional material for Saltworks Theatre Company without restrictions or compensation.

Parent/Guardian Signature

Date