



# 2017 Workshop Application Form

Please print clearly. All information is considered confidential.  
One form per student.

## STUDENT INFO

Last \_\_\_\_\_ First \_\_\_\_\_  
DOB \_\_\_\_\_ Workshop Age \_\_\_\_ Grade in Fall 2016 \_\_\_\_  
Student Cell Phone: \_\_\_\_\_ - \_\_\_\_\_  
Student E-mail \_\_\_\_\_  
Referred by (if applicable): \_\_\_\_\_

## PARENT(S) / LEGAL GUARDIAN(S)

Name(s) \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_  
Home Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
Cell Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
Work Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
E-mail \_\_\_\_\_

## OTHER PARENT INFO IF NECESSARY

Name(s) \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_ Zip \_\_\_\_\_  
Home Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
Cell Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
Work Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_  
E-mail \_\_\_\_\_

## ADDITIONAL EMERGENCY CONTACT- NOT parent/guardian

Name \_\_\_\_\_  
Phone (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Relationship \_\_\_\_\_

## MEDICAL

Are there any medical issues PCA staff should be aware of?  
(i.e., allergies, seizure disorder, learning disabilities, etc.)

No  Yes **-Please explain in detail on the back of form.**

## T-shirts:

(We cannot guarantee shirt sizes received after May 14.)

Child S (6-8) M (10-12) L (14-16) XL (18-20)  
Adult S M L XL XXL

## Application Fees

- Children's Theatre Workshop..... \$150.00 \_\_\_\_\_  
*June 12-24, 2017 - T-shirt, snacks included*
- Youth Theatre Workshop.....\$150.00 \_\_\_\_\_  
*July 10-15, 2017 - T-shirt, Saturday pizza, texts included*
- Both Workshops.....\$275.00 \_\_\_\_\_  
*(snacks, one T-shirt, Saturday pizza, texts included)*
- Help Support Another Student Seeking Financial Aid with your  
Contribution of \_\_\_\_\$25 \_\_\_\_\$50 \_\_\_\_\$75 \_\_\_\_\$100 \_\_\_\_\$150

**Total** ..... \$ \_\_\_\_\_

**Please make check payable to Portage Center for the Arts.**

*(No refunds for either workshop after June 1, 2017.)*

**Payment:** The Parent/Legal Guardian signing this agreement agrees to pay the required tuition. *Students who are continually disruptive may be asked to leave the program with no tuition reimbursement.*

**Disclaimer:** The Parent/Legal Guardian will not hold the Portage Center for the Arts, Inc. staff, faculty, directors or volunteers responsible for damage, injury or loss resulting from participation in this program. The Parent/Legal Guardian assumes responsibility for any damage to the Portage Center for the Arts property caused by the student. Consent is hereby given for the Student to participate in authorized Portage Center for the Arts performances without compensation. Consent is also given for full and unrestricted use of Student's image and/or voice, without compensation, in photographs, videos, printed materials such as newspapers, magazines, brochures, catalogs, websites, created for Portage Center for the Arts promotions. This Agreement may not be modified orally; it may only be modified in writing signed by both parties. By signing below the Parent/Legal Guardian agrees that all information above is correct and agrees to the fees and disclaimer.

\_\_\_\_\_  
Parent/Legal Guardian Signature

\_\_\_\_\_  
Date

### **CTW participants, please note:**

**Classes this year will run 8am to 12pm, every day for every student, with short breaks in between class rotations. Snacks will be provided. We have also reduced performances to Saturday only.**

### **All participants:**

**PLEASE SEND YOUR CHILD WITH HIS/HER OWN WATER BOTTLE EVERY DAY!**

**Please return or mail your application with payment to:  
PCA, 301 E. Cook St, PO Box 866, Portage, WI 53901.**