

# Possum Point Players

## 2023 Summer Day Camp Registration Form

**GRADES 2 -5**

***Drama Camp***

**July 10 - July 14, 2023**



**GRADES 6 – 10**

***Theatre Academy***

**July 17 – July 21, 2023**

**Possum Hall, 441 Old Laurel Road, Georgetown, Delaware  
(302) 856-3460**

- ❖ Camping hours: 9:00 a.m. —4:00 p.m. (*Doors open at 8:45 a.m. and we ask that campers be picked up promptly at 4:00 p.m.*)
- ❖ Seeking fun loving youths entering grades 2 through 5 AND grades 6 through 10 in the fall of 2023.
- ❖ Learning about the art of theatre, including acting, dance, improvisation, vocal work, focus & concentration.
- ❖ The camp will culminate with original productions, produced and presented by the campers on Friday of each camp week.

**Enrollment fee: \$200.00 per camper**

**ENROLLMENT IS LIMITED** – In order to be guaranteed participation and a camp T-shirt, **registration must be received No later than June 16, 2023** ~ three weeks prior to first camp start date.

Questions?? Please call the Possum Point Players' Office at (302) 856-3460

**Complete the Registration Form below and return with payment to Possum Point Players,  
Summer Camp, P.O. Box 96, Georgetown, DE 19947**

---

### POSSUM POINT PLAYERS 2023 CAMP REGISTRATION

Camper's Name \_\_\_\_\_ DOB \_\_\_\_\_ Age \_\_\_\_\_

\_\_\_\_\_ ***Drama Camp*** / July 10 – July 14 \_\_\_\_\_ ***Theatre Academy*** / July 17 – July 21 \*Grade in Fall 2023 \_\_\_\_\_

Parent's Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ ST \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Work Phone \_\_\_\_\_

Email Address \_\_\_\_\_ Has this child previously attended a PPP camp? \_\_\_\_\_

T-Shirt Size: (circle choice)    ***Adult*** - SM   MD   LG   XL    ***Youth*** - SM   MD   LG   XL

CASH \_\_\_\_\_ CHECK \_\_\_\_\_ CK # \_\_\_\_\_

Credit Card # \_\_\_\_\_ Expiration Date \_\_\_\_\_ CID \_\_\_\_\_

Name on Card: \_\_\_\_\_ Billing Zip: \_\_\_\_\_

(There is a 4.00% convenience fee for use of credit card)

**FOR OFFICE USE ONLY**    *Theatre*   *Drama*   *Recorded* \_\_\_\_\_    *Letter* \_\_\_\_\_

# Possum Point Players

## 2023 Summer Camp Consent & Information Form

### **Personal Information**

Name of Camper \_\_\_\_\_ F \_\_\_ M \_\_\_ D.O.B. \_\_\_\_\_  
Parent Name \_\_\_\_\_ Cell/Work Phone \_\_\_\_\_  
Address \_\_\_\_\_ Home Phone \_\_\_\_\_  
Name of Emergency Contact \_\_\_\_\_  
Relationship to Camper \_\_\_\_\_  
Emergency Contact Phone Number[s] \_\_\_\_\_ [C/W] \_\_\_\_\_ [Home]

### **Medical Information**

Does child have any allergies: YES / NO If yes, please explain \_\_\_\_\_  
\_\_\_\_\_  
Is child in good health? YES / NO If no, please explain \_\_\_\_\_  
\_\_\_\_\_  
Is child prescribed an inhaler or Epi-Pen? YES / NO If yes, please explain \_\_\_\_\_  
\_\_\_\_\_

### **Assumption of Risk Statement**

I have registered my child \_\_\_\_\_, for Possum Point Players' \_\_\_\_\_ Camp  
And hereby grant permission for said child to participate in all phases and activities of this program. By signing below, I  
am asserting that I knowingly and voluntarily assume all risks for my child as well as medical expenses incurred as a  
result of injury or illness to my child.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

**Authorization of Medical Care**

I hereby authorize the Camp Director and/or authorized personnel of Possum Point Players' \_\_\_\_\_ Camp to be responsible for my child \_\_\_\_\_, for the purpose of medical attention. In the event of an emergency, I authorize the arrangement for any necessary emergency medical treatment, including but not limited to calling 911. I understand that Possum Point Players personnel will make every attempt to contact me as soon as possible in the event of such an emergency. I agree to assume all financial liabilities.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

**Photo Release**

I grant permission to Possum Point Players, Inc. to use, reproduce, and /or publish for the promotion of Possum Point Players, Inc. [i.e., publications, videos, websites, etc.] and its programs, photographs and/or film footage taken during the camp. The use of the photographs is strictly limited for use by Possum Point Players Inc. They will not be sold or reproduced for sale in any form.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

**Pick-up Release Consent**

Please list the person/persons that are authorized to pick-up your child from camp. Unless prior arrangements have been made, anyone not appearing on the list will be prohibited from picking up the camper. **Please print clearly.**

| Name  | Relation | Phone Number |
|-------|----------|--------------|
| _____ | _____    | _____        |
| _____ | _____    | _____        |
| _____ | _____    | _____        |
| _____ | _____    | _____        |