

St. Michael Drama Club & St. Mike's Peewee Players

Present

SHREKPECTATIONS:

WHAT YOU NEED TO KNOW ABOUT SHREK THE MUSICAL JR.

§ Like to sing? § Like to dance?

§ Want to work on characterization? § Want to audition like a pro?

If you'll be in 3rd-8th grade in the fall, have we got a camp for you!!!

Monday, June 5- Friday, June 9

9am-12pm in the St. Michael Auditorium

Cost: \$50

Drop off each morning between 8:30-9:00 and pick up between 12:00-12:30.

On Friday there will be a Show and Tell session of what we've learned at 11:30 and all are welcome!

Any questions, please contact Mr. Ciesluk at rciesluk@sms.noacsc.org or Mrs. Denike at (248)470-6075.

Return completed forms and checks made out to SMS to Mrs. Denike c/o Ellie Denike 6A by May 24.

Name _____ Parent(s) Name _____

Address _____

Best Phone # _____ Email _____

School _____ Grade Fall of '17 _____

Shirt size YS YM YL AS AM AL AXL

Emergency Contact _____ Emergency Phone # _____

Permission to Participate

I, the undersigned, am the parent and/or legal guardian of the child identified on this form. By and through my signature affixed below, I do hereby give my authorization and consent for my child to participate in the St. Michael Drama Club and St. Mike's Peewee Players Summer Camp. Further, I agree to release and hold harmless St. Michael the Archangel Parish and School against any liability, loss, damages and/or expense, in law or equity, by any persons resulting from the administration, performance, planning, preparation, development, conduct and execution of the Summer Camp June 5-9, 2017.

Photograph and Video Release

I fully understand that my child may be included in photos or videos for promotion of the program or production for archival purposes. I give permission for the staff to photograph or videotape my child and include my child in photographs or videos utilized by St. Michael the Archangel Parish for its legitimate purposes, including, but not limited to, organizational/event promotion.

I HAVE READ FULLY UNDERSTAND AND AGREE TO THE INFORMATION ABOVE.

Name of Participant

Signature of Parent or Guardian

Date