

**JOIN THEATRE SIMPSON'S ALPHA PSI OMEGA  
FOR THE THIRD ANNUAL CHILDREN'S THEATRE CAMP!**

🎃 **TRICK, TREAT, AND THEATRE** 🎃



**Who:** Kindergarten-5<sup>th</sup> grade students

**When:** Saturday, October 28<sup>th</sup>

**Where:** Blank Performing Arts Center, Simpson College, Indianola, IA

**Cost:**

<b>1 child</b>	<b>\$45</b>
<b>2 children</b>	<b>\$40 (per child)</b>
<b>3 or more children</b>	<b>\$35 (per child)</b>

**Check-In from 8:00-9:00AM**

- 🎃 **Parents, there will be a brief showcase of what your child(ren) learned beginning at 12:15pm. Please arrive a few minutes early to watch them before check-out!**
- 🎃 **Activities will include various Halloween/Fall-themed theatre related classes: warm up games, musical theater, and prop creation. Dressing up in Halloween costumes is highly encouraged! T-shirts and snacks will be provided.**

**Please mail registration forms by *OCTOBER 1<sup>st</sup>* to:**

**Bri Stoever**

**701 N. C St. Unit 4418**

**Indianola, IA 50125**

**Please contact [apo@simpson.edu](mailto:apo@simpson.edu) for more information.**

# CHILDREN'S THEATRE CAMP REGISTRATION FORM

## Information

Child's Name: \_\_\_\_\_ Age: \_\_\_\_\_

Grade: \_\_\_\_\_ Elementary School: \_\_\_\_\_

Address: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Parent(s) Name(s): \_\_\_\_\_

Phone Number: \_\_\_\_\_ Alternate Phone Number: \_\_\_\_\_

Parent's Email: \_\_\_\_\_

Allergies or Medical Concerns: \_\_\_\_\_

\_\_\_\_\_

Child's T-Shirt Size: \_\_\_\_\_

## Payment Method

Cash       Check (make payable to Simpson College)

## Photo Release

I give permission for Alpha Psi Omega to photograph my child during this event, and for these photos to be potentially uploaded to their Facebook Page or Simpson College's website.

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_