

2019 GENESIUS THEATRE WORKSHOP FOR TEENS AND ADULTS

(AGE 14 ON UP)

Please fill out a separate form for each person in your family attending –
This form is **ONLY** for the WORKSHOPS

Name: _____

Address: _____ City/State/Zip: _____

Email Address _____

Phone Primary: _____ Phone Secondary: _____

THIS SECTION - FILL THIS OUT FOR ONLY AGES 14 TO 18

(for only ages 14 to 18) - Age as of 6/1/19: _____ Grade as of 9/19: _____

Guardian's Name: _____ Guardian's Name: _____

ONE DAY SUMMER INTENSIVE WORKSHOPS

Please check the Workshop's you wish to attend

HOW TO AUDITION - SATURDAY – JULY 13, 2019 – _____

DANCE WORKSHOP - TUESDAY – JULY 9, 2019 – _____

SCENE STUDY WORKSHOP - THURSDAY – JULY 11, 2019 _____

DIRECTING WORKSHOP - SATURDAY – JULY 20, 2019 – _____

MUSIC DIRECTING WORKSHOP - TUESDAY – JULY 23, 2019 - _____

CHOREOGRAPHERS WORKSHOP-THURSDAY– JULY 25, 2019 – _____

See Pricing Info Below & Fee Terms >>>

PRICING –

\$135 for a one-day workshop

5 % off for 2 separate workshops

2 Workshops x \$135.00 = \$270.00 x 5 % = \$13.50 discount = **\$256.50 for 2 Workshops**

10 % off for 3 separate workshops

3 Workshops x \$135.00 = \$405.00 x 10% = \$40.50 discount = **\$364.50 for 3 Workshops**

15% off for 4 or more separate workshops

4 Workshops x \$135.00 = \$540.00 x 15% = \$81.00 discount = **\$459.00 for 4 Workshops**

15% off for 5 workshops

5 Workshops x \$135.00 = \$675.00 x 15% = \$101.25 discount = **\$573.25 for 5 Workshops**

15% off for 6 separate workshops

4 Workshops x \$135.00 = \$810.00 x 15% = \$121.50 discount = **\$688.50 for 4 Workshops**

Total Workshops Attending _____

Total Amount \$ _____

Terms of Agreement:

PAYMENT IS DUE WHEN YOU SEND THE REGISTRATION FORM IN.

. TUITION IS NON-REFUNDABLE except for withdrawals made in writing a minimum of 14 days prior to start of camp.

-The student agrees to abide by the rules set by Genesisus staff for the health, safety, and welfare of all the campers and staff.

- Genesisus Staff reserves the right to deny, cancel, sever, or suspend any enrollment if deemed in the best interest of the workshop. There will be no refunds.

- I authorize the officials of the Genesisus to act on my behalf while my child is in their care, including the power to authorize emergency medical treatment. I also give my permission for my child to take part in all activities and trips and release Genesisus staff from all liabilities for any and all damage and/or injury.

Please Initial Here _____.

I have read, understand and agree to all of the terms of agreement and items discussed in this enrollment form for my child, prior to signing this application.

PARENT'S SIGNATURE: _____ DATE: _____

>RETURN TO - Genesisus Theatre Office

**Genesisus Theatre
2019 Genesisus Summer Camp Reg. Form
153 North 10th Street
Reading, PA 19601**

**Make Checks Payable To: Genesisus Theatre
Or Please Provide Your Credit Card Information Below –
Please Print Legibly**

Name on Credit Card _____

Billing Address of Card _____

Billing Phone # _____

Type of Card _____ Security Code _____ Exp. Date _____

Card Number _____

**Phone: 610-371 - 8151
GENESIUSDIFFERENCE.ORG**

FOR MORE INFORMATION: Please call Larry Fecho – Artistic Producer at 610-780-7627 or write him at LJFecho@FechoProductions.com