KHSINDIAN THEATRE

PRESENTS

Pow Wow Theathe (amp

The Keller High School Theatre Department will host the **28th Annual Summer Theatre Workshop** (aka Theatre Pow Wow!) on **June 6 through 9**. All students having just completed Grades 1st through 6th are encouraged to attend. This year's hours will be from 10:00 a.m. to 2:00 p.m., Monday through Thursday. Students must provide their own sack lunch each day.

Theatre subjects such as acting, mime, mask making, makeup, improvisations, musical theatre and production will be taught by high school theatre students under the direction of professional theatre personnel Melissa Freeman, Sam Fields and Clarissa Shirley.

Due to construction at KHS, classes will be taught at Bear Creek Intermediate.

Space is limited to the first 100 students who register. All others will be placed on a waiting list.

The cost is \$100.00 and includes the classes and all materials. Checks may be made payable to KHS Theatre. Please return application and payment to:

KHS Indian Theatre Department c/o Clarissa Shirley

601 Pate Orr Keller, TX 76248

All applications received by May 15 will receive a FREE T-SHIRT and SAVE \$25!

You may register on the first day of camp, however early registration is encouraged and appreciated.

For more information, contact the KHS Indian Theatre Department at 817-744-1547 or clarissa.shirley@kellerisd.net

Camp Dates Camp Cost JUNE 6-9 2016 \$100 Camp Hours 10am-2pm Early Bird Special \$75 for applications received by May 15 OCATION

Indian Theatre Summer Pow-Wow Registration

Information

Camper Name:

Home Campus:

Current Grade (2015-16 school year): Age:

Parent Name(s): Address:

Camper Phone: Camper Email: Parent Phone(s): Parent Email(s):

Please circle:

Male / Female

Shirt Size: Youth / Adult

S M L XL

Please list camper's allergies, medications, and any other concerns or special needs that you feel the camp directors need to be made aware of:

Emergency Contact Information Name:

Relationship to Camper: Phone Number(s):

Insurance Information

Insurance Provider: Policy Number: Group Number: Phone Number:

Student Signature: Parent (Legal Guardian) Signature:

To be filled out by Camp Director Deposit paid by: CASH CHECK (check number:)