

SCT Jr. Summer Youth Program 2018
 Youth/Teen Actors' Program
 Presents

SHREK

THE MUSICAL JR

Summer Youth Program Director **James Reed**
 Summer Youth Program Manager **Putsy Hong**

Direction by **Ashlyn Kelley**
 Musical Direction by **Mana Shoostari**
 Choreography by **Gianna Nemie**

Registration Starts Sunday April 8th, 2018 @ 10AM

Performance Dates: July 20th - 28th, 2018
 Friday, July 20th @ 7PM
 Saturday, July 21st @ 2PM & 7PM
 Sunday, July 22nd @ 2PM
 Friday, July 27th @ 7PM
 Saturday, July 28th @ 2PM & 7PM

Classes / Rehearsal Schedule:
 June 18th - July 28th, 2018
 SCT Jr. Theatre (ages 8 - 17*) Noon - 4 PM
 SCT Jr. Crew (ages 10-17*) Noon - 4 PM
 (Rehearsal Schedule is attached)

*Must be 8 or 10 years old as of June 18th, 2018

Costs:
 \$350 Per Student
 \$650 for 2 children in the same immediate family.
 (Partial scholarships will be available*)

*deadline for scholarships is March 31st, 2018 sctlivetheatre.com/youth-programs

**SCT Jr. Summer Program 2018
 Shrek Jr.**

Student's Full Name:	Select One: <input type="checkbox"/> SCT JR Stage <input type="checkbox"/> SCT JR Crew	Student's Shirt Size: <input type="checkbox"/> Youth Size <input type="checkbox"/> Adult Size
Address:	City / State:	Zip Code:
Day Time Phone:	Cell Phone:	
Age:	Birthdate:	Parent's Email:
Total Amount Due:	Cash:	Check:
Card Number:		Exp. Date:
Name of Card Holder	Signature of Card Holder:	
<ul style="list-style-type: none"> - I understand that there is limited space for my student(s) and enrollment is based on a first come first serve basis (starting April 8th, 2018), by submitting this form does not guarantee me a spot for my student(s) and may get put on a waiting list. - I understand that the full amount of tuition is due at registration, to complete the enrollment process for my student(s). - I understand that my student(s) cannot miss more than two rehearsals, if so my student(s) will be removed from the program and my student's tuition will not be refunded. - I understand that by submitting my email address I would like to receive any additional information pertaining to Stockton civic theater and SCT Jr. 		
Name of Parent:	Signature of Parent:	