



SUMMER CAMP 2021

JR. COUNSELOR APPLICATION

Please select camp(s) you wish to counsel & fill out page 2 with contact information.

DANCE & CIRCUS CAMP: May 24-28. \$275

Monday-Friday for 5 full camp days. 1 Performance May 28.

CREATIVE ADVENTURES, SESSION 1: May 31-June 4. \$275

Monday-Friday for 5 half camp days. HALF-DAY ONLY.

COULD YOU HUG A CACTUS?: May 24-June 6. \$550

Monday-Friday for 10 full camp days + 3 show days June 4-6.

Disney's THE DESCENDANTS: May 31-June 13. \$550

Monday-Friday for 10 full camp days + 3 show days June 11-13.

CREATIVE ADVENTURES, SESSION 2: June 7-11. \$275

Monday-Friday for 5 half camp days. HALF-DAY ONLY.

Disney's THE JUNGLE BOOK KIDS: June 7-20. \$550

Monday-Friday for 10 full camp days + 3 show days June 18-20.

BIG BAD MUSICAL: June 14-27. \$550

Monday-Friday for 10 full camp days + 3 show days June 25-27.

WILLY WONKA KIDS: July 5-18. \$550

Monday-Friday for 10 full camp days + 3 show days July 16-18.

Disney's THE LITTLE MERMAID JR: July 5-18. \$550

Monday-Friday for 10 full camp days + 3 show days July 16-18.

SEUSSICAL JR: July 19-August 1. \$550

Monday-Friday for 10 full camp days + 3 show days July 30-August 1.

Jr. Counselors can attend the high school camp, *CURTAINS (July 19-August 1)*, at a reduced tuition rate. This discount applies to the high school camp ONLY.

- Counsel one-week session, pay \$475
- Counsel 1 two-week session, pay \$400
- Counsel 2 two-week sessions, pay \$250
- Counsel 3 two-week sessions, pay \$100

SCT is working diligently to stay up to date on all best practices, state, and local guidelines regarding Covid-19 precautions for summer camps and enrichment centers. As guidelines are updated, our policies and procedures will also be updated. Please note (per the information panel on the left side of this page) that Jr. Counselors must attend a mandatory training session, which includes health and safety training.

- If accepted into the program, Jr. Counselors must attend the mandatory training session on Saturday, May 15, 12PM-2PM.
- Hours are 8:45am-5:15pm, or until all assigned duties are finished. Creative Adventures hours are 8:45am-12:45pm.
- Jr. Counselors will be scheduled to open (arrive by 8am) or close (leave at 6pm) at least once per camp session.
- All Jr. Counselors must work the entire session of camp including all shows. No exceptions.
- Jr. Counselors must bring their own lunch. A snack and drink will be provided in the afternoon.
- No applicant will be considered for this program unless they have filled out a form and turned it in with their parent/guardian signature.
- SCT is a 501(c)3 non-profit organization. Volunteer hours count as community service.

Got questions? Contact US!

PHONE:
912.238.9015

WEBSITE:
www.savannahchildrenstheatre.org

EMAIL:
camps@savannahchildrenstheatre.org

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Please write clearly.

Name _____ New ____ Returning ____

DOB ___/___/___ Age ___ Gender/Pronouns _____ School (Fall '21) _____ (Grade (Fall '21) _____

Allergies/Current Medications _____

Special Needs/Concerns _____

Parent/Guardian 1 _____

Address _____ City _____ State _____ Zip Code _____

Place of Employment _____

All Contact #'s _____

Primary Emails _____

Please check here if interested in receiving our monthly email newsletter

Parent/Guardian 2 _____

Address (if different) _____ City _____ State _____ Zip Code _____

Place of Employment _____

All Contact #'s _____

Primary Emails _____

Please check here if interested in receiving our monthly email newsletter

First Emergency Contact if Parent/Guardian(s) Cannot be Reached: _____

Relationship to Student _____ Phone # _____

Second Emergency Contact if Parent/Guardian(s) Cannot be Reached: _____

Relationship to Student _____ Phone # _____

I give permission for my child to attend and participate in theatre events sponsored by The Savannah Children's Theatre LLC. I acknowledge that by doing so, there is a possibility of physical injury to my child and I release the Savannah Children's Theatre LLC, its operators, instructors and representatives for all damages my child may sustain or suffer while attending and participating in such events. I assume full financial responsibility for any treatment necessary in the event of personal injury. In addition, I hereby give my permission for emergency medical treatment, in the event I cannot be reached in a timely manner. I hereby acknowledge that ALL camp fees are non-refundable. I acknowledge that I have been informed that this program is not a licensed childcare facility. I understand this program is not required to be licensed by the Georgia Department of Early Care and Learning and is exempt from state licensure requirements. I understand that Savannah Children's Theatre LLC retains the right to use photographs of campers taken at SCT for publicity and advertising purposes.

***Applicant Signature _____ Date _____

***Parent/Guardian Signature _____ Date _____