

BCT THEATER LAB REGISTRATION FORM

Student Name: _____

Birthdate/Age: _____ Gender: _____

Parent/Guardian Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____ Parent E-mail: _____

Check the box for which courses you wish to register for.

- Spring/Fall Theater Lab \$449 Ages 12-18**
- Radio Theater Lab \$325 Ages 12-18**
- Summer Sessions / Spring Break Camp \$250** Ages 6-8 Ages 9-12
- Flash Lab Workshop \$100 Ages 12-18**

PAYMENT METHOD VISA MASTERCARD CHECK PAYABLE TO BCT

If paying with a credit card please call the box office at 208.331.9224 x205

Please mail this form to: BCT, 854 Fulton Street Boise, ID 83702

Questions? Contact: kc@bctheater.org, or call 331-9224 x204

MEDICAL AND PHOTO CONSENT

I, the undersigned parent/guardian of _____
do hereby grant authority to the staff of BCT to render judgment concerning medical assistance or hospital care in the event of an injury or illness during my absence or if I am unable to be contacted. PHOTO: I further grant permission for BCT to reproduce and use my child's image in marketing, promotion and digital materials.

Family Physician: _____

Phone: _____

Parent/Guardian Signature: _____

Boise Contemporary Theater creates, produces and presents vibrant and dynamic professional theater that illuminates enduring themes while exploring contemporary issues and ideas. BCT is committed to fostering the education and training of professionally minded students.

All classes will be held at BCT: 854 Fulton Street, Downtown Boise.