

tcsf

Temple City Schools Foundation

www.tcsf4students.org

2017 SUMMER ENRICHMENT PROGRAM

Grades 2-8

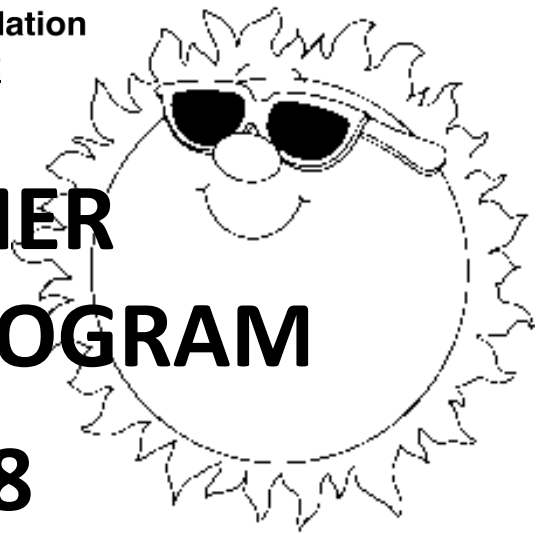
5 WEEKS

JUNE 14, 2017 – JULY 13, 2017

(Monday, July 3rd and Tuesday, JULY 4TH Are HOLIDAYS)

CLASS MEETS MONDAY - THURSDAY

SUMMER MUSICAL THEATRE.....TEMPLE CITY HIGH SCHOOL



CLASS HELD AT TCHS



MUSICAL THEATRE – GRADES 2-8



DREAMWORKS
MADAGASCAR
A MUSICAL ADVENTURE JR.

Coming this summer to Temple City

A Junior Musical for grades 2-8 @

Temple City High School

We are looking for actors, singers, and dancers from grades 2-8 to perform at Temple City High School as part of our annual Summer Musical Theatre training program.

**MONDAY – THURSDAY 1:00-4:00 PM
JUNE 12-JULY 14**

**PERFORMANCES ON
JULY 13TH AND 14TH**



**COST: \$350 W/REGISTRATION BY MAY 31ST. \$375 AFTER MAY 31ST
INCLUDES: COLLECTOR'S SCRIPT, T-SHIRT, PHOTO HEAD SHOT, ETC.**

FLEXIBILITY WITH YOUR VACATION SCHEDULE.

ADDITIONAL COST OF \$35 FOR A DVD OF THE PERFORMANCE.

FOR MORE INFORMATION CALL MATT BYERS (626) 548-5053

You can register using the TCSF Summer Enrichment registration form or online at templecitybrighterside.org. You can also register at the First class meeting on June 12th at the TCHS Performing Arts Building.

REGISTRATION FORM

(USE ONE FORM PER STUDENT)

Paid By: CHECK # _____ PAYPAL _____

Register Early! Classes will be filled as registration is received.

Registration Deadline 5/31/17

PLEASE PRINT

STUDENT'S NAME: LAST _____ Legal FIRST Name: _____ Nickname _____

ADDRESS: _____ CITY _____ ZIP _____ PHONE #: _____

Age _____ Birth Date ____/____/____ Current Grade _____ Current School _____ Room # _____

List serious medical information, allergies, medication, etc. _____

EMERGENCY INFORMATION

PARENT/GUARDIAN NAME: FIRST _____ LAST _____

HOME TELEPHONE # _____ WORK/CELL PHONE # _____

***Required** PARENT/GUARDIAN EMAIL: _____

IN CASE YOU CAN NOT BE REACHED:

ADDITIONAL EMERGENCY CONTACT NAME: _____ PHONE # _____

If no one can be reached, I authorize emergency medical care deemed by the TCSF Staff as necessary

Signature: _____ Date: _____

I have read and understand the Drop-off /Pick-up Policy and the Discipline Policy, including NO refunds for disciplinary reasons.

Signature: _____ Date: _____

CLASS CHOICES FOR 2017 TCSF SUMMER SCHOOL ENRICHMENT PROGRAM

SESSION 1 / 7:50-9:40 a.m. - \$240 (\$40 discount if taking 2 sessions) Class Fee: _____

(1st Choice) _____

(2nd Choice) _____

SESSION 2 / 9:55-11:45 a.m. - \$240 (\$40 discount if taking 2 sessions) Class Fee: _____

(1st Choice) _____

(2nd Choice) _____

BAND / ORCHESTRA - \$175 (Band/Orchestra counts as taking 1 session) Class Fee: _____

____ INTERMEDIATE BAND – SESSION 1 (7:50-9:40)

____ ADVANCED BAND –SESSION 2 (9:55-11:45)

____ INTERMEDIATE ORCHESTRA – SESSION 2 (9:55-11:45)

____ ADVANCED ORCHESTRA – SESSION 1 (7:50-9:40)

SUMMER MUSICAL THEATRE - \$375 (Mon-Thu 1:30-4:40 p.m.) Class Fee: _____

(Includes: Collector's script, t-shirt, photo head shot, etc.)

Additional \$35 Fee for DVD

DVD Fee: _____

TOTAL FEES \$ _____

Make checks payable to TCSF (or use PayPal @ www.tchs4students.org)