



~ Children's Summer Musical Theatre Workshop Application ~

Student Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_  
Home Phone: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_  
Email(s): \_\_\_\_\_  
Emergency Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**Special Considerations (allergies, etc...)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Anticipated Vacations or Conflicts:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Absence Policy** – We allow 2 absences only due to vacation or illness. Student's must attend all rehearsals during production week and must perform in all shows. If there is a conflict with a performance date, the student may not be eligible to participate in the workshop. The instructor, along with the WCLOC Board of Directors will determine the student's eligibility.

**Tuition & Payment:**

*WCLOC Member Tuition: \$150.00*

*Non WCLOC Member Tuition: \$160.00*

**Credit Card Information:**

Account Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_  
Cardholder Name (print clearly): \_\_\_\_\_  
Cardholder Signature (sign): \_\_\_\_\_  
Billing Address (city, ST, zip): \_\_\_\_\_

**Payment by Check:**

Make Checks Payable to: WCLOC

**Applications must be completed and accompanied by full payment then mailed to:**

WCLOC  
PO Box 51  
Worcester, MA 01613

\*\*\*Remember – SPACE IS LIMITED, so return your application as soon as possible.