

Musical Theatre Summer Camp Registration form 2024

Students Name _____ Age _____

Parent/Guardian _____ Cell # _____

Second Parent/Guardian _____ Cell # _____

Best Email to receive info: _____

Address: _____

City _____ State _____ ZIP _____

Parent Signature _____ Date _____

Pricing

Please write in the full cost in the far right column and then any applicable discounts in the appropriate row.

Encore Performers Camp Ages 11-18, July 15th-26th 9am-3:30 pm M-F

Full Cost:	\$395/two weeks, \$250 for one Week	_____
Register by May 15	-\$70 for 2 weeks, -\$30 for one week	_____
Camp Alumni	-\$25 for 2 weeks, -\$10 for one week	_____
Current Private Student	-\$25 for 2 weeks, -\$10 for one week	_____
Additional Siblings*	-\$50 for 2 weeks, -\$20 for one week	_____

*This only applies to the second and each subsequent person from the same family

Playground Performers Camp Ages 7-12, August 12th-16th 9am-3:30 pm M-F

Full Cost:	\$250	_____
Register by May 15	-\$30	_____
Camp Alumni	-\$10	_____
Current Private Student	-\$10	_____
Additional Siblings*	-\$20	_____

*This only applies to the second and each subsequent person from the same family

TOTAL OWED _____

Note: If you are signing up more than one child, please use separate forms and only include sibling discounts on the second and each subsequent child.

Note: If you are between the ages of 11-12, you may opt to be involved in both camps. You will have different experiences, being in a leadership role in the younger camp and being able to learn from older kids in the other. If you wish to sign up for both, you may pay half price for the one week camp.

Turn Over to Enter Payment Info

Accent Music and Pittsburgh Performance Society
Musical Theatre Summer Camp Registration form 2024

Payment Information (please choose one)

- Check: (Make payable to "Accent Music" and send to 859 Missionary Dr. Suite 100, Pgh, PA 15236)
 Credit Card: (You may pay by clicking "make a payment" on our website or by filling out the information below)

Our website is: accentmusicacademypgh.com

Name on Credit Card _____

CC# _____

Exp Date ____/____ CV#____ Billing Street #____ Billing ZIP _____

CC Signature: _____ Date: _____

Please mail form to: Accent Music Academy at 859 Missionary Dr. Ste 100, Pittsburgh, PA 15236

OR

Scan form and email it to: accentmusicpa@gmail.com