



Northport - E. Northport Community Theater Camp

Monday, July 10, 2017 – Friday, August 11, 2017

NAME _____

ADDRESS _____

PHONE _____ E-MAIL _____ CELL _____

AGE _____ GRADE (Sept., 2017) _____ (Grade 2-12)

Please check which session you will be attending
(price includes a mandatory camp tee shirt and 1 show DVD)
(All sessions are Monday – Friday for 5 weeks)

9:30 – 3:30 PM _____ (Bring Lunch) \$ 995.00

9:30 – 12:00 Noon _____ \$ 535.00

(Day care available before and after camp days for a fee)
Contact Bette Silver to make arrangements (631) 896-5970

Enclose check or charge and send to: **Northport – E. Northport Community Theater**
P. O. Box 572
Northport, NY 11768

CHARGE: Visa _____ Discover _____ Master Card _____

Card # _____ Expiration Date _____

FULL NAME AND FULL ADDRESS INCLUDING ZIP CODE PLEASE
(As it appears on credit card)

