



# Sign Me Up For Exciting Summer Fun.

RESET FORM

TUITION INFORMATION: \$195/\$189 SEASON TICKET MEMBER  
\$245 ALL-STAR WEEK

FIVE EASY WAYS TO REGISTER: 1. In person 2. By email 3. By phone 4. By mail 5. By fax



**CHILD** Pronouns.....

First..... Middle..... Last.....

School Name..... Grade..... Birth Date...DAY.../...MONTH.../...YEAR... Age (as of June 30, 2023).....

Street Address .....

Town/City..... Prov..... Postal code..... Child's Home Phone .....

**PARENT/GUARDIAN - CONTACT INFORMATION**

**PARENT/GUARDIAN #1**

First..... Last..... Ms.  Mrs.  Mr.  Other.....

Street Address .....

Town/City..... Prov..... Postal code..... Home Phone .....

Work Phone..... Cell Phone..... E-mail .....

**PARENT/GUARDIAN #2**

First..... Last..... Ms.  Mrs.  Mr.  Other.....

Street Address .....

Town/City..... Prov..... Postal code..... Home Phone .....

Work Phone..... Cell Phone..... E-mail .....

Child Lives With:..... Person Responsible For Payment .....

**EMERGENCY CONTACT INFORMATION - ALTERNATE PICKUP/RELEASE**

**EMERGENCY CONTACT #1**

First Name..... Last Name..... Home Phone .....

Work Phone.....Cell Phone..... Email .....

Relation To Child .....

**EMERGENCY CONTACT #2**

First Name..... Last Name..... Home Phone .....

Work Phone.....Cell Phone..... Email .....

Relation To Child .....

Please List Those People Including In Addition To Parents/Guardians Who Are Permitted To Pick Up Your Child:

1:..... 2:..... 3:.....

CAMP RAINBOW REGISTRATION FORM PARTICIPANT NAME:..... AGE:.....

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**MEDICAL RELEASE INFORMATION**

INSURANCE INFORMATION (OPTIONAL)

Policy Number..... Health Insurance Provider ..... Primary Physician .....  
Address..... Phone.....

Please list any medical problems, including any requiring maintenance medication (i.e. Diabetic, Asthma, Seizures).

Medical Problem	Required Treatment	Should Paramedic Be Called?	
.....	.....	Yes <input type="checkbox"/>	No <input type="checkbox"/>
.....	.....	Yes <input type="checkbox"/>	No <input type="checkbox"/>
.....	.....	Yes <input type="checkbox"/>	No <input type="checkbox"/>

Is your child presently being treated for an injury or sickness, or taking any form of medication for any reason?

Yes  No  If Yes, Explain: .....

Is your child allergic to any type of food or medication?

Yes  No  If Yes, Explain: .....

Does your child require a special diet?

Yes  No  If Yes, Explain: .....

**THE PURPOSE OF THE ABOVE LISTED INFORMATION IS TO ENSURE THAT MEDICAL PERSONNEL HAVE DETAILS OF ANY MEDICAL PROBLEM WHICH MAY INTERFERE WITH OR ALTER TREATMENT.**

I understand that I will be notified in the case of a medical emergency involving my child. In the event that I cannot be reached, I authorize the calling of a doctor and the providing of necessary medical services in the event my child is injured or becomes ill.

Parent's/Guardian's Initials .....

I understand that Rainbow Stage nor Camp Rainbow will not be responsible for the medical expenses incurred, but that such expenses will be my responsibility as parent/guardian.

Parent's/Guardian's Initials .....

List any dance, theatre or music experience:

.....  
.....

Swimming level: .....

T-shirt Size (circle one):

Youth Sm  Youth Med  Youth Lg  Adult Sm  Adult Med  Adult Lg  Adult Xl

Yes, I would like to receive Rainbow Stage News and important updates from the theatre.

**PLEASE INDICATE HOW YOU HEARD ABOUT CAMP RAINBOW**

Social Media  Website  School  Word of Mouth  Flyer  Other.....

RESET FORM

**TERMS OF AGREEMENT**

**PHOTO RELEASE**

I hereby give permission for my child to be photographed during Camp Rainbow. I understand the photos will be used to keep a journal of activities, to share during power point presentations and/or reports to our donors and for promotional purposes including flyers, brochures, newspaper and on the internet. I understand that although my child's photograph may be used for advertising, his or her identity will not be disclosed, I do not expect compensation and that all photos are the property of Rainbow Stage and Camp Rainbow.

Parent's/Guardian's Initials .....

Rainbow Stage and Camp Rainbow co-organizers are not responsible for lost or damaged personal property. All scheduled events are subject to change. I understand that no fees will be refunded or transferred unless a child is unable to participate due to an accident or illness per physician orders. Children's' photos and quotes may be used for publicity purposes. In case of an emergency, and if a family physician cannot be reached, I hereby authorize my child to be treated by Certified Emergency Personnel (i.e. EMT, First Responder, and/or Physician).

I hereby waiver, release and hold harmless Rainbow Stage (1993) Inc and its directors, officers, employees, agents, successors and assigns (together, Rainbow Stage) and The City of Winnipeg and its elected representatives, officers, employees, agents, successors and assigns from and against all claims, actions, demands, costs and expenses whether in contract, negligence, tort or statue of any kind, with respect to death, injury, loss, harassment or damage to the person or the property of my child or to my person or property, howsoever caused, arising out of or in connection with my child's participation with Rainbow Stage.

Guardian Signature: .....

Date: .....

Printed Name of Parent/Guardian: .....

**CAMP RAINBOW IS AN INCLUSIVE ENVIRONMENT.**

Respect for others and good behavior are essential to a good experience. The Camp is geared for 9-13 year olds, exceptions may be made if there is space availability.

**CAMP RAINBOW REFUND AND CANCELLATION POLICY.**

- Cancellation up to (30) days prior to start of the program for a 50% refund of the program fee
- No refunds will be given for cancellations with less than 30 day's notice

Initialed Read:.....

**CHECK OFF THE CAMP WEEKS YOU'D LIKE TO REGISTER FOR:**

<b>SOLD OUT</b> July 10-14 (ages 9-12)	<input type="checkbox"/> Aug 14-18 (ages 11-14)
<input type="checkbox"/> July 17-21 (ages 11-14)	<b>SOLD OUT</b> August 21-25 (ages 9-12)
<b>SOLD OUT</b> July 24-28 (ages 9-12)	<input type="checkbox"/> August 28-Sept 1 (All-Star, ages 9-14) <i>*All-Star application form required</i>

**CAMP WEEK TUITION: \$195 PER WEEK**  
**SEASON TICKET MEMBER**  
**CAMP TUITION: \$189 PER WEEK**  
**ALL-STAR WEEK: \$245**

**PAYMENT:**

Camp Week Tuition: \$.....

Season Ticket Holder  
 Camp Week Tuition : \$.....

Please consider a donation  
 to Rainbow Stage! \$.....

(TAX RECEIPT PROVIDED FOR DONATION AMOUNTS OVER \$20)  
 CHARITY #: 13546 7777 RR001  
 =====

**GRAND TOTAL** \$.....

**METHOD OF PAYMENT:**

Cheque  Cash  Visa  MasterCard

Credit Card # .....

Expiry Date: .....

Signature: .....



## ALL-STAR APPLICATION FORM

Please download and fill out the pdf form and then send your pdf Application Form to:

Taylor Gregory - Education Developer [education@rainbowstage.ca](mailto:education@rainbowstage.ca) Subject Line: Allstar Submission – Child Name

**Please send your Application Form and Video Audition via YouTube link by 5:00 pm on Saturday, April 30, 2023**

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Please tell us why your child is interested in attending Camp Rainbow All-Star Week:

### TRAINING & EXPERIENCE

Is your child represented by an agent or agency?

YES  NO

If so, please provide the name:

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Please list your child's training and performing experiences in music, theatre and dance (attach performing resume if available):

Please list any experiences your child has had with Rainbow Stage:

Please indicate which of the other 4 camps weeks you are reserving a spot in (if any)