



Workshop Registration Form

*Please check the boxes below for the workshop(s) you would like your child to attend
(Please complete a separate form for each child.)*

Session	Age Group	Dates	Cost	Attending
Session #1	9-13	July 5 – 9	\$275	full
Session #1A	6-8	July 5 – 9	\$275	full
Session #2	9-13	July 12 – 16	\$275	full
Session #2A	6-8	July 12 – 16	\$275	<input type="checkbox"/>
Session #3	9-13	July 19 – 23	\$275	<input type="checkbox"/>
Session #3A	6-8	July 19 – 23	\$275	<input type="checkbox"/>
Session #4	9-13	July 26 – 30	\$275	full
Session #4A	6-8	July 26 – 30	\$275	<input type="checkbox"/>

All workshops held at the Williston Theatre in Easthampton.

All workshops are Monday-Friday 8:30 am-4:30 pm. Free show Friday at 4:00 pm.

For more info, call (413) 788-4750 or email slcomedy@comcast.net.

please print clearly

Child's Name _____

Age (as of July 1 2009) _____ Birthdate _____ Grade _____ M _____ F _____

Address _____

City _____ State _____ Zip _____

Email (Legible!) _____

Parent's Name _____ Phone _____

Parent's Name _____ Phone _____

Amount enclosed \$ _____

Please make check payable to and mail to:

Hampshire Shakespeare Company

c/o Steve Henderson, 93 Grochmal Ave, #79, Indian Orchard, MA 01151

All confirmations by Email except by special request.

FOR OFFICE USE ONLY

check# _____ date received _____ amount _____ confirmed _____