

**MARTIN COUNTY ARTS COUNCIL ~ 124 WASHINGTON STREET ~  
WILLIAMSTON, NC 27892**

MCAC HOURS OF OPERATION: Tuesday – Friday, Noon to 4 p.m

[www.martincountyarts.com](http://www.martincountyarts.com)

**SUMMER DRAMA CAMP!**

**10 a.m. – Noon**

**July 27-31, 2026**

**REGISTRATION AND PAYMENT FORM**

Student First Name \_\_\_\_\_ Student Last Name \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ Email \_\_\_\_\_

Child's Age and Birthday \_\_\_\_\_ Child's Grade \_\_\_\_\_

Parent/Guardian Name \_\_\_\_\_ Phone (Daytime) \_\_\_\_\_ (Cell) \_\_\_\_\_

Does the student have any allergies? \_\_\_\_\_

If so, please list them \_\_\_\_\_

Emergency Contact Name \_\_\_\_\_ Phone \_\_\_\_\_

Medical concerns that might limit child's activities \_\_\_\_\_

Are you or your child a member of the Martin County Arts Council? \_\_\_\_\_ Fee: \$65

Check Enclosed (Make checks payable to the Martin County Arts Council) A \$20 processing fee will be charged for all returned checks.

Waiver of Liability: In consideration for the Martin County Arts Council making programs available to myself or my child, I hereby release the Martin County Arts Council, its employees, volunteers, instructors and agents from any and all liability, cost/expense associated with any injury I or my child may sustain while participating in any of the programs and activities. Furthermore, I hereby hold the Martin County Arts Council, its employees, volunteers, instructors and agents harmless for any damage, loss or claims to my person, child or property. I assume full and all risks and responsibilities on the premises, both known and unknown. In case I cannot be reached in an emergency, I give my permission to the Martin County Arts Council to select proper emergency care and treatment for my child or myself. I understand that payment must be made in full and there will be no refunds of money, either full or partial after the first day of camp/class. I also agree to Martin County Arts Council photographing my child or myself and using it in promotional materials. There will be a \$20 non-refundable processing fee in the event of a refund. Refunds are possible up to one week prior to class on a prorated basis. No refunds 5 days prior to onset of class.

Signature of legal guardian \_\_\_\_\_ Date \_\_\_\_\_

With questions or for enrollment information, please contact Glinda Fox during regular hours @ 252-789-8470

Mail registration form and check to:

Martin County Arts Council, PO Box 1134, Williamston, NC 27892