

# YES! I WANT TO MAKE TV THIS SUMMER 2025 - MAKE YOUR MOVIE

Student's Name: \_\_\_\_\_

Address: \_\_\_\_\_

E-mail: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ School: \_\_\_\_\_

Birth Date: \_\_\_\_/\_\_\_\_/\_\_\_\_ Grade: \_\_\_\_\_ Gender: \_\_\_\_\_

Parent / Guardian Name: \_\_\_\_\_

Work Phone:( ) \_\_\_\_\_ Pager: \_\_\_\_\_ E-mail: \_\_\_\_\_

Parent / Guardian Name: \_\_\_\_\_

Work Phone:( ) \_\_\_\_\_ Pager: \_\_\_\_\_ E-mail: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Phone:( ) \_\_\_\_\_

I authorize my child to participate in all camp activities, including leaving EBMC facilities while under adult supervision. I agree that all media produced and is exclusive property of EBMC, all rights reserved.

Signature of Parent / Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

**ILLNESS, ACCIDENT, OR INJURY:** In the event of a serious illness or injury, I authorize emergency medical care for my child. I wish my child to be taken to the nearest Emergency Medical Facility, and the following doctor notified:

Doctor's Name: \_\_\_\_\_ Phone:( ) \_\_\_\_\_

Insurance Company and Policy Number: \_\_\_\_\_ Date: \_\_\_\_\_

**Summer Teen Media Camp 2025 – July 7<sup>th</sup> thru July 25<sup>th</sup>, 2025- 10am to 2pm  
Ages: 12-17 - Monday thru Friday - In person at EBMC's Down Town Facilities.  
Cost: \$850.00 - Summer Session**

**\*Cancellation/Refund Policy: \*No Refunds**

All production and classes located in Berkeley's Downtown Arts District at:

***East Bay Media Center***

**1939 Addison Street Berkeley, CA 94704-1101 Phone: (510) 843-3699**

**email: maketv@aol.com website: [www.eastbaymediacenter.com](http://www.eastbaymediacenter.com)**

**Pay by Debit/Credit card/PayPal: go to EBMC website home page scroll down to PayPal / Donate Button or come to East Bay Media Center for card swipe.**