YES! I WANT TO MAKE TV THIS SUMMER 2020!

Student's Name:	
Address:	
≣-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 while under adult supervision. I agree that all EBMC, all rights reserved.	, 5
Signature of Parent / Guardian:	Date:
ILLNESS, ACCIDENT, OR INJURY: In the event emergency medical care for my child. I wish n Medical Facility, and the following doctor notif	my child to be taken to the nearest Emergency
Doctor's Name:	Phone:()
Insurance Company and Policy Number:	Date:

Summer Teen Media Camp 2020 – July 6-24, 2020 Time: Monday through Friday, 10:00 AM to 2:00 PM

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