



ROSEBUD SUMMER THEATRE CAMP APPLICATION

Dates: July 5 - 11, 2026

Price: \$750 + GST

Any questions can be directed to admissions@rosebudschoolofthearts.com

I. PERSONAL INFORMATION

Name _____
(Last) (First) (Middle) (Goes by)

Pronouns: _____ Birthdate: ____/____/____ Age _____

Name of High School presently attending _____

High School location (City, Province) _____ Grade Entering in Fall 2026: _____

Your Address _____

City _____ Province _____ Postal Code _____

Home Phone _____ Cell _____ Email _____

Emergency Contact _____

Relationship _____ Email _____

Daytime Phone _____ Nighttime Phone _____

Second Emergency Contact _____

Relationship _____ Email _____

Daytime Phone _____ Nighttime Phone _____

II CAMP INFORMATION

How did you learn about the Summer Theatre Camp?

Why are you interested in attending the RSA Summer Camp?

What is your experience in theatre so far?

III. HEALTH INFORMATION

Provincial Health Care No. _____ Province _____

Name of Doctor or Clinic: _____ Phone _____

Do you currently have any allergies or dietary restrictions we should be aware of?

☐ Yes ☐ No (Circle one)

If yes, please specify your allergies & dietary restrictions.

Are you currently taking any medication for a physical or psychological condition?

☐ Yes ☐ No (Circle one)

If yes, please specify the medication, for what condition and how long you have been taking it.

Are there any health, mental health, learning challenges or limitations that could affect your participation in Summer Theatre Camp?

If yes, please explain.

Other Requirements:

Please email a headshot (photo)

Please email a 100-200 word bio about yourself

APPLICATION PROCESS

Please ask **two people to submit a reference form**. The referees should be people who know you well at this point in your life, for example a teacher, employer or friend. Referees will send their documents directly to Rosebud School of the Arts, where they remain confidential.

Once your application has been accepted, you'll be contacted by the Summer Theatre Camp Coordinator. Billing information and options for payment will be communicated to you at that point.

I understand that use of smart phone / device will be limited to 1/2 hour per day for the duration of the Rosebud Summer Theatre Camp.

____ Initials

Submit completed application form to: admissions@rosebudschoolofthearts.com