

Session Requested _____ Time _____ **Day Camp 2012**

Name _____ Birthdate _____ Age _____ Sex _____

Home Address _____

City _____ State _____ Zip _____

Phone _____ Cell Phone _____

Full Name of Parent or Legal Guardian _____

Cash, check or money order enclosed made payable to The Marquis Theatre

Charge my Visa MasterCard

Charge card number _____ expiration date _____

Circle Shirt Size:

Child: **10-12** **14-16**

Adult: **S** **M** **L**

Mail to:

The Marquis Theatre

135 E. Main Street

Northville, Michigan 48167

For details call (248)349-8110

Air conditioned