



REGISTRATION APPLICATION
(*Please register each participant separately)

Child's Name _____ Age _____ (as of Sept. 12, 2023)

School Attending _____ T-shirt size _____

Parent(s)/Guardian(s): _____

Email Address(es): _____

Phone Number(s): _____

Mailing Address: _____

My child is a ☐ Returning Center Stager! ☐ New Center Stager!

Three words to describe your child: _____

**Please submit registration form and \$40 fee to the Johnson Center at
300 E. Walnut Street • Troy, AL 36081 • (334)670-2287
Submit form to arts@jcatroy.org • Pay with debit or credit card to
www.jcatroy.org/online-payments. Click on Purchases and enter total
Make checks payable to: Johnson Center for the Arts
PayPal payments to arts@jcatroy.org**

For Office Use Only:

Registration Fee Paid on _____ Received By _____

2024