

Johnny & Diane Martinez of  
Tango Fusion Dance Company  
and Lake Avenue Drama Club  
present ...

## Triple Threat Theater Camp August 6<sup>th</sup> - 10<sup>th</sup>, 2018 For Campers Ages 7-14

Join us for a fun week of musical theater  
foundations including Musical Theater Jazz,  
Voice and Acting. All levels are welcome!

**Camp Hours:** 9:00 AM-2:15 PM

**Location:** St. Peter's Parish Center,  
64 Hamilton Street  
Saratoga Springs, NY

**Tuition:** \$275.00  
(\$250 before June 1st)

### THIS YEAR'S SHOW IS FAME!

**A Day at Camp:** During the day the campers  
enjoy singing classes, jazz classes, musical theater  
choreography classes, acting classes and the  
experience of putting it all together into a  
production number.

**What makes us unique** - Each summer Triple  
Threat Theater Camp selects a musical and creates  
a tribute that includes 8 musical numbers from the  
musical and acting scenes as well. We write the  
scripts, based on the musical, and ensure that each  
camper has the same size role.

**Triple Threat Focus** - In addition to working with  
their age group, campers will also select a category,  
either singing dancing or acting and work with one  
of the directors more intensely, to take their skills  
and experience to another level

**Performance** - Campers perform for family and  
friends on the last day of camp.

### Staff:

Johnny Martinez  
Diane Lachtrupp Martinez  
Lesley O'Donnell  
Melissa Mason Lacijan

### Registration Form

Please mail this form with a check  
payable to Tango Fusion Dance to:

**Tango Fusion Dance Company**  
42 White Street  
Saratoga Springs, NY 12866

Phone: (518)932-6446

Email: stepdl@aol.com

Website: Tangofusiondance.com

Please provide the following information:

Child's name: \_\_\_\_\_

Age: \_\_\_\_\_ Male: \_\_\_\_\_ Female: \_\_\_\_\_

Grade in Sept. 2018: \_\_\_\_\_

School Name: \_\_\_\_\_

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home phone: \_\_\_\_\_

Work phone: \_\_\_\_\_

Cell phone: \_\_\_\_\_

Email: \_\_\_\_\_

\*Please provide a brief description of your  
camper's dance & theatre experience on the  
back of this form.

Signature:

I have read, agreed and signed the  
Parental Consent below.

\_\_\_\_\_  
Parent/Guardian

Date: \_\_\_\_\_

Parental Consent

I, \_\_\_\_\_,  
give my child,

\_\_\_\_\_  
Permission to participate in the  
Triple Threat Theater Camp  
August 6<sup>th</sup> - 10<sup>th</sup> 2018