

**Fairfax Public Access**

**2021 TELEVISION 101 STUDIO/FIELD CAMP REGISTRATION FORM (for ages: 12yr – 18yr)**

Fairfax Public Access, 2929 Eskridge Road, Suite S, Fairfax, VA 22031 - (571).749.1102 - jerausquin@fcac.org

----- Circle the camp(s) that you are registering for -----

<p><b>2021 TV 101 Studio Camp</b>  2 week camp  Camp orientation: Sat. 7/17, 9am-10am  Mon. 7/19 – Fri. 7/30, 8am-12pm  Cost: \$500</p>	<p><b>2021 TV 101 Field Camp</b>  2 week camp  Camp orientation: Sat. 7/31, 9am-10am  Mon. 8/2 – Fri. 8/13, 9am-1pm  Cost: \$500</p>	<p><b>2021 TV 101 Post-Production Camp</b>  1 week camp  Camp orientation: Sat. 8/14, 9am-10am  Mon. 8/16 – Fri. 8/20, 9am-1pm  Cost: \$350</p>
---	--	---

Today's Date: \_\_\_\_\_ Date Received: (Office Use Only) \_\_\_\_\_

STUDENT NAME: (Please print or type) \_\_\_\_\_

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

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

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

Pick three areas of interest in order of preference (see class descriptions).  
(Example: Studio Camera, Technical Directing, Audio Board, Lighting, Talent/hosting...)

1. \_\_\_\_\_ 2. \_\_\_\_\_

3. \_\_\_\_\_ 4. \_\_\_\_\_

\*Age of participant: \_\_\_\_\_

Signature of Adult / Guardian \_\_\_\_\_

**Note: The \$26 FPA 1yr membership fee is included in the cost of each camp**  
**10% early registration discount for enrollment completed by March 31<sup>st</sup> or**  
**5% early registration discount for enrollments completed by May 31st.**

**PAYMENT AND REGISTRATION MUST BE PROCESSED TO SECURE A PLACE IN THE CAMP. PLEASE MAKE PAYMENT BY CHECK, VISA, or MASTERCARD.** If you are paying by credit card, you can phone or fax in the information. Check or credit card payment is accepted by mail or in person.

Payment Method: \_\_\_Check \_\_\_MasterCard \_\_\_Visa Card Number \_\_\_\_\_

Exp. Date \_\_\_\_\_ Signature \_\_\_\_\_

**I understand that this camp is a team effort, and in order to keep my place in the camp I must participate in camp activities and exercise my assignments in good faith.**

\_\_\_\_\_  
Participant's Signature

\_\_\_\_\_  
Parent or Guardian Signature (and relationship if applicable)