



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

Re: Performing Arts

Class

Camp

1000. S. Eisenhower Blvd.

Middletown, PA 17057

717.208.2198

[www.thehcpac.org](http://www.thehcpac.org)

[hcpac@thehcpac.org](mailto:hcpac@thehcpac.org)

EIN#: 231604732

Parent Name: \_\_\_\_\_

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

Participant Name	Class/Camp	Dates of Experience	Amount

TOTAL: \_\_\_\_\_

Staff Signature: \_\_\_\_\_

Position with HCPAC: \_\_\_\_\_

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