



Reader's Theatre

What:

Reader's Theatre is an engaging and motivating strategy that combines reading practice and performance for ages 7 and older. Reader's Theatre's goal is enhance students' reading skills and confidence by having them practice reading with a purpose!

When:

Mondays, Tuesdays, Wednesdays, and Thursdays, July 8-18, 12:30-4:30pm
Performances will be on Thursday afternoons at 4:00pm.

Cost:

Cost is \$150. A \$40 nonrefundable deposit is required by June 3rd along with the registration form to reserve a space. The deposit is applied to the total cost and payment. Full payment is required by June 21st. Refunds are not given after June 30th. Families of LU employees receive a 10% discount. Limited stipends are available, if needed.

Where:

Camp will be held in the Center for Communication Studies & Theatre Room #101

Parking:

Parking is available in Lots 11 (Com Arts) or 12 (Hull) for drop off. You may also drop your camper off at the sidewalk on Franklin St. as long as a Reader's Theatre staff member is present. You are able to see the front doors of the Center for Communication Studies & Theatre (CSTAC) building from this road.

Directions:

From South Main St., you will turn onto Wynne Dr. Then take a right onto Pine St. The CSTAC building will be ahead of you on your left. Please turn left onto Franklin St. where you can drop off your child. After drop off, you will continue down Franklin St. until you get to Race St.. Take a left onto Race St.. Then you will come to Wynne Dr. on your left. This will take you out to South Main St.

Complete One Registration Form (attached) for Each Child and Send to:



Longwood Speech, Hearing, & Learning Services
PO Box 513
Farmville, VA 23901

For more information, call (434) 395-2972
www.longwood.edu/shls
www.facebook.com/LUSHLS

Reader's Theatre will be conducted by Communication Sciences and Disorders graduate students and supervised by a speech-language pathologist.

Longwood University is firmly committed to non-discrimination on the basis of race, color, religion, handicap, national origin, political affiliation, martial status, sex, or age.



Reader's Theatre Registration Form

Please Complete and Return with Deposit

Child's Name: _____ Parent's Name: _____

Child's Date of Birth: ____/____/____ Grade in Fall: _____ Current Age: _____ T-shirt size _____

School Currently Attending: _____ Known food allergies: _____

Home Phone: (____) _____ - _____ Cell Phone: (____) _____ - _____

Email Address: _____

Home Address: _____

Weeks Attending (Check all that apply) _____ July 8—11 _____ July 15— 18

Who is permitted to pick up your child? _____



Photography and Videography Release

Client/Participant Name: _____ DOB: _____

Parent/Legal Guardian Name: _____

I am authorizing Longwood Speech, Hearing and Learning Services to photograph and/or video the service sessions for the use(s) listed below. I understand that these are used for informational, educational and/or promotional purposes only and will not be sold to any outside agency.

I give consent for: (Initial) _____ Photography (Initial) _____

Videography of the following:

Initial _____ Education/Training of Students

Initial _____ Official University Publications

Initial _____ Marketing Materials

Initial _____ Camps and will be shared with other participants

Initial _____ I **DO NOT** given consent for photography or videography.

X _____

X _____

Signature of Client

Signature of Parent/Legal Guardian

Date Signed: _____