

YOUNG CHICAGO CRITICS APPLICATION

Session 1: June 18 – June 27, 2008 (Ages 7-10 & Ages 11-14)

Session 2: July 7 – July 16, 2008 (Ages 11-14 only)

1) Please send the application below and tuition payment by April 4, 2008. Apply as early as you can because space is limited.

2) Additional information will be requested upon receipt of application. Confirmation of acceptance will be e-mailed or mailed by April 11, 2008.

APPLICATION FORM

Name: _____ Age (as of 6/27/08): _____

Parent or Guardian Name: _____

Address: _____

City/State/Zip: _____

Telephone #: (home) _____ (cel) _____ (work) _____

Parent E-mail Address: _____

Where did you hear about Young Chicago Critics?: _____

If your child is age 11-14, please check the session of participation:

Session 1 (June 18-27): _____ **Session 2** (July 7-16): _____

* *Children ages 7-10 must participate in Session 1.*

TUITION PAYMENT INFORMATION

___ Check or money order enclosed for \$325 per child. (Please make checks payable to "Facets".)

___ Visa ___ MasterCard ___ AMEX ___ Discover Card

Card Number: _____

Cardholder Signature: _____ Expiration date (mo/yr): ____/____

(The charge will appear on your monthly statement as "FMI-Facets Multi-Media, Inc.")

___ My child has a current Facets Future Filmmakers membership. The YCC fee with active membership is \$292.50.

SEND ALL MATERIALS TO:

Young Chicago Critics
c/o Facets Multi-Media
1517 West Fullerton Ave.
Chicago, IL 60614

or fax your application to: 773-929-0266

If you have questions, please contact "Kidsfest" at 773-281-9075 or by e-mail at Kidsfest@facets.org

STAFF ONLY:

DATE: _____ AMT: _____ TYPE: PD ___ FFF ___ SCH ___ SIB ___ NOM ___