

Registration Form – 2016-17 Theater Productions

CONTACT INFO

Student Name: _____ **DOB:** _____ **Age:** _____ **Grade:** _____

Mother /Guardian Name _____ Father /Guardian Name _____

Street Address _____ City _____ State _____ Zip _____

Home Phone _____ Email _____

Mom Cell Phone _____ Mom Work Phone _____

Dad Cell Phone _____ Dad Work Phone _____

Emergency Contact _____ Relationship _____

Phone _____ home/cell/work Student Email _____

FEES & TUITION: Registration Fee = **\$25** per student (Valid: 09/01/16 thru 8/31/17, \$50 max per family) \$ _____

Fall 2016	Show Dates	Director	Rehearsal Day/Time	Tuition Cash/CC
The Lion King Jr (Grades 3-9)	Jan 27-29	Jaimee Banks	Tues & Fri 4:15-6:15	\$550/\$560

\$20 Discount – Sibling \$ _____
 \$15 T-shirt (Size _____) \$ _____
 Total Due \$ _____

Date: _____ Cash Check# _____ PayPal CC Paid: \$ _____ Balance Due: \$ _____
 Date: _____ Cash Check# _____ PayPal CC Paid: \$ _____ Balance Due: \$ _____

Spring 2017	Show Dates	Director	Rehearsal Day/Time	Tuition Cash/CC
TBD (Grades 3-12)	May 19-21			\$550/\$560

\$20 Discount – Sibling \$ _____
 \$15 T-shirt (Size _____) \$ _____
 Total Due \$ _____

Date: _____ Cash Check# _____ PayPal CC Paid: \$ _____ Balance Due: \$ _____
 Date: _____ Cash Check# _____ PayPal CC Paid: \$ _____ Balance Due: \$ _____

Summer 2017	Show Dates	Director	Rehearsal Day/Time	Tuition
TBD (Grades: HS-College)				\$
				\$

\$20 Discount – Sibling \$ _____
 \$15 T-shirt (Size _____) \$ _____
 Total Due \$ _____

Date: _____ Cash Check# _____ PayPal CC Paid: \$ _____ Balance Due: \$ _____
 Date: _____ Cash Check# _____ PayPal CC Paid: \$ _____ Balance Due: \$ _____

Agreement to Policies and Waivers (Classes)

PLEASE NOTE: Students may not attend class until this form has been signed and returned to the office with payment, or arrangements have been made for a payment plan.

Payment:

I understand that payment is expected at the time of registration, and **must** be received by the PAC office on or before the first day of class or first lesson. A payment plan for lessons and programs is available by prior arrangement with the office for an additional \$15 fee. I understand there will be a \$15 late fee if tuition is not paid by the end of the first class or lesson of a semester (unless prior arrangements have been made with the office).

Refunds:

I understand there are no refunds for lessons, classes, productions, or registration fees unless a program is cancelled. PAC reserves the right to consolidate classes or substitute instructors when necessary and appropriate.

Waiver:

If Adult:

I agree to waive Performing Arts Center of MetroWest (PAC) and its staff, faculty, and board of directors, from liability for accidental personal injury or damage to or loss of property.

If registering child:

I give my child permission to participate in classes at the Performing Arts Center of MetroWest (PAC) and agree to waive PAC and its staff, faculty, and board of directors, from liability for accidental personal injury or damage to or loss of property.

Permission to Use Photos and/or Videos

By registering myself or my child for lessons, classes, or productions at PAC, I give the Performing Arts Center of MetroWest (PAC) permission to use photos and/or video of my child (or myself, if an adult student) for publicity purposes. Parents who do not wish their child's photo to be used must contact the PAC office.

Signature: _____

Student, or parent, if student is under 18

Date: _____

Student Name: _____