



# Musical Theatre Conservatory

*Theatre for Life*

973.868.6259 • musicaltheatreconservatory@gmail.com

## REGISTRATION FORM

Student's Name \_\_\_\_\_ Age \_\_\_\_\_ Gender \_\_\_\_\_

Address \_\_\_\_\_

Grade \_\_\_\_\_ School \_\_\_\_\_ Birth Date \_\_\_\_/\_\_\_\_/\_\_\_\_

Parent/Guardian Names \_\_\_\_\_

Parent's Email \_\_\_\_\_ Student's Email \_\_\_\_\_

Home Phone \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Emergency Contact Phone \_\_\_\_\_

Course	Day	Time	Fee

Registration Fee	\$50
<b>TOTAL</b>	

**\*\*\*\*\*SUBMIT ALL PAYMENT & CORRESPONDENCE TO:\*\*\*\*\***

**9 RIDGEWAY CT. WEST ORANGE, NJ 07052**

50% non-refundable deposit is due at time of registration. Balance is due by March 1, 2014

I have enclosed a check in the amount of \$ \_\_\_\_\_ (payable to Musical Theatre Conservatory)

Please charge the amount of \$ \_\_\_\_\_ and the balance from my card

Card # \_\_\_\_\_ CCV# \_\_\_\_ \_

Exp. Date \_\_\_\_/\_\_\_\_ (Circle one) Visa MasterCard Discover

Parent's Signature: \_\_\_\_\_

Date \_\_\_\_\_

## Please Read Carefully

**Refund Policy:** You will receive a full refund (less the \$40.00 registration fee and any credit card fees that may have been incurred) if you send a written request by mail to Musical Theatre Conservatory (from here on referred to as MTC) with a postmark no later than three (3) weeks before the first class. There will be no refunds for late arrivals, early withdrawals or missed sessions. If a course is cancelled due to lack of enrollment, tuition will be refunded in full.

**Leaving the Building:** Students may not leave the building between or after classes unless they have written permission from a parent or guardian exempting MTC from liability. A parent or guardian must pick-up their child inside the building. Students may not play, congregate, or wait in the parking lot for their rides. MTC will only be responsible for students while they are in class.

**Other Charges:** There is a \$25.00 charge for checks returned by the bank.

**Please Note:** MTC reserves the right to refuse admission to any student for whom full payment has not been made by the first class. It is expressly agreed and understood that if any student is found possessing illegal drugs, alcoholic beverages, leaving the assigned class areas, damaging or defacing property or conducting him/herself in an inappropriate fashion, the student may be dismissed at the sole discretion of the directors with no reduction in tuition. As further consideration of this enrollment, it is agreed that MTC may use any photographs, film, or any other medium in which the student appears for publication, advertisement, and/or exhibition.

**The signing of this form indicates that I have read the above and agree to its contents.**

\_\_\_\_\_ Date \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Parent or Guardian

\_\_\_\_\_ Date \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Student

**Please indicate any previous training you've had in the areas listed below.**

Area	Name of School or Camp	Instructor	Time Studied
Tap			
Jazz			
Ballet			
Voice			
Acting			
Other Skills			

Are there any medical or emotional issues we should be aware of? \_\_\_\_\_

\_\_\_\_\_

RELEASE OF LIABILITY, WAIVER OF CLAIMS, ASSUMPTION OF RISK, INDEMNITY AGREEMENT, MEDICAL AUTHORIZATION AND PHOTOGRAPHY AND VIDEO RELEASE

Please note that by signing this agreement you give up the right to sue for any injury or damages, however caused.

To Musical Theatre Conservatory, Inc. ("MTC") and its employees and representatives (collectively known as "representatives").

I hereby sign this agreement on behalf of myself, my personal representatives, my heirs and my assigns.

1. I agree as a precondition to
  - a. My child's participation in all events organized by MTC and its representatives, including, but not limited to all activities conducted as part of its children's performing arts training program; and
  - b. My express desire to permit and authorize my child to go off of MTC premises (to shop, have lunch or to do such things as my child may do once he/she leaves the MTC premises) without the supervision of MTC and/or its representativesand in further consideration of MTC allowing my child to do so, that I will be strictly bound by the terms of this agreement.
2. I fully understand the risks and dangers associated with my child's participation in these activities and accept same entirely at my own risk.
3. I hereby waive any and all claims which I may have against MTC and its representatives and release MTC and its representatives from all liability for injury, death, property damage or any other loss sustained by my child as a result of my child's participation in the activities, due to any cause whatsoever; including negligence, breach of contract, or breach of any other duty of care by MTC and its representatives. This waiver and release of liability shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.
4. I appreciate that this agreement limits the liability of MTC's representatives to the same extent as it limits the liability of MTC, even though the representatives are not formal parties to this agreement.
5. In consideration of my MTC permitting my child to participate in MTC programs, the sufficiency of which I hereby acknowledge, I do hereby grant to MTC, the right to video, photograph, produce a likeness of, and record the voice of my child and an unlimited right to use and/or reproduce such video, photographs, likenesses or the recorded voice of my child in any legal manner and for the internal or external promotional and informational

activities of MTC anywhere in the world, in any medium now or later existing, in its sole discretion. Neither my child nor I shall have any right to control the use or publication by MTC of the photographs, and/or audio or video recordings. MTC is also granted the right to change, alter, blur, obscure or otherwise edit such materials in connection with such use. On behalf of my child and myself, I hereby release, waive and discharge any claims of any kind or nature arising out of or relating to the use of the photographs, and/or audio or video recordings against MTC or any person or firm authorized by MTC to publish said materials ("Publisher").

6. If I provide MTC with my e-mail address, I grant permission to receive periodic e-mails from MTC regarding products, services and programs offered by MTC.
7. I authorize MTC's appropriate personnel to call for medical care for the Child/Children and/or to transport the Child/Children to a medical facility or hospital if, in the opinion of such personnel, medical attention is needed of the Child/Children. I further authorize and consent to any X-ray examination, anesthetic, medical or surgical diagnosis or treatment and hospital care rendered under the general or special supervision and upon the advise of a physician and surgeon licensed under the provisions of the Medical Practice Act or a dentist licensed under the Dental Practice Act and on the staff of any acute general hospital holding a current license to operate a hospital from the State of New Jersey.

I AM THE PARENT OR LEGAL GUARDIAN OF THE BELOW NAMED CHILD AND I HAVE READ AND UNDERSTAND THIS AGREEMENT. I UNDERSTAND THAT THIS DOCUMENT CONTAINS A PROMISE NOT TO SUE MTC AND ITS REPRESENTATIVES AND THAT IT CONSTITUTES A RELEASE OF LIABILITY AND AN INDEMNITY FOR ALL CLAIMS.

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Name of Child Date (Day, Month, Year)

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Name of Parent/Guardian Signature of Parent/Guardian

**Musical Theatre Conservatory, Inc. ("MTC")  
PERMISSION SLIP**

**PARENTS OR GUARDIAN:** Please complete both Part I and Part II of this permission slip.

**PART I – Permission**

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

\_\_\_\_\_ has my permission to (check those that apply):

\_\_\_\_\_ Participate in all MTC classes

\_\_\_\_\_ Arrive at and leave MTC premises without parental or adult supervision (e.g. to walk home at the end of the day). I understand that he/she will not be supervised when off MTC premises

\_\_\_\_\_ Drive with MTC representatives for scheduled trips such as to a Pool Party and to Luna Stage

\_\_\_\_\_ Swim at the Pool Party

**PART II – Medical Information**

If Medical Conditions Exist:

A. My child, \_\_\_\_\_, has a medical condition as outlined below, which might be of concern. I hereby direct MTC representatives to handle the situation in accordance with my written directions in case of an emergency.

B. Medical Condition or Allergies:

C. Directions:

D. In case of an emergency, I understand that every effort will be made to contact me. If the school is unable to reach me or my designated emergency contact, I hereby give the school permission to act on my behalf in seeking emergency treatment for my child in the event such treatment is necessary. I hereby give permission to those administering emergency treatment to do so using the measures necessary.

I hereby waive any and all claims which I may have against MTC and its representatives and release MTC and its representatives from all liability for injury, death, property damage or any other loss sustained by my child as a result of my child's participation in the activities, due to any cause whatsoever; including negligence, breach of contract, or breach of any other duty of care by MTC and its representatives. This waiver and release of liability shall be construed broadly to provide a release and waiver to the maximum extent permissible under applicable law.

Parent/Guardian Signature \_\_\_\_\_

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