

RAGLAND YOUTH CHOIR

2009 Chorus Season

Registration Form - Fee \$40 for new/\$30 for past choir members

(Please complete Liability Release on second page)

Date: _____
Name: _____ Age: _____ Birthdate: ___/___/___

Address: _____ Girl _____ Boy _____
Home Phone _____

City State Zip _____

Cell Phone _____

School of Attendance: _____ '09-'10 Grade Level _____

Mom's Name: _____ Place of work and
phone: _____

Dad's Name: _____ Place of work/phone: _____

I give permission for RYC to share the above information with choir families. Yes No

Email address: _____

If you have email access, please provide this information. We do not rent or share our list with anyone, and would prefer to communicate by email whenever possible, to keep operating costs low.

Shirt Size: (Circle) Youth: Small, Medium, Large

(This is a part of the informal uniform for both boys and girls, and is worn frequently for performances.)

EXPECTATIONS AND COMMITMENTS: Membership in the RYC requires a full commitment from each member and his/her parents. Regular attendance is the most important aspect of a choir member's participation and progress in the chorus. Members are excused from attendance ONLY UNDER THE FOLLOWING CIRCUMSTANCES: **ILLNESS OR INJURY, FAMILY EMERGENCY, OR SCHOOL CONCERT.**

Absences must be reported to the RYC office **prior** to rehearsal @ 884-0651.

EMERGENCY AUTHORIZATION: I hereby authorize the Ragland Youth Choir or its agents or volunteers to take my child/ward to the nearest available physician or facility for medical treatment in the event of any emergency in which neither parent can be reached. I authorize any licensed physician or medical facility to treat my child or ward.

Health concerns, allergies or disabilities of child/ward:

Parent Signature: _____ Date: _____

Please return this Registration form with the following page and make checks payable to the Ross Ragland Theater:

RYC ☙☎ 218 N. 7th St. ☙☎ Klamath Falls, OR 97601 ☙☎ Tel: 541-884-0651 ext. 22 ☙☎ Fax: 541-884-8574 education@rrtheater.org

LIABILITY RELEASE FORM

I, the parent or guardian of the below-named child/ward, give my permission for his/her participation in all activities, rehearsals, and performances of the Ragland Youth Choir. I hereby release and discharge the Ross Ragland Theater/Ragland Youth Choir, its agents, directors, and volunteers who participate in or conduct activities on behalf of the Ross Ragland Theater from all claims, demands or actions which the parent or guardian's heirs, executors, administrators or assigns may have, against the Ragland Youth Choir, its successors or assigns, for all personal injuries, known or unknown, to my child/ward and injuries to property, real or personal, caused by or arising directly or indirectly out of any activities conducted by the Ragland Youth Choir, including, but not limited to, scheduled activities, rehearsals, and performances.

I hereby release and discharge the Ragland Youth Choir, its agents, directors and volunteers who participate in or conduct publicity activities on behalf of RYC from all claims, demands, or actions which the parent or guardian's heir, executor, administrators or assigns may have, against the Ragland Youth Choir/Ross Ragland Theater, its successors or assigns.

PUBLICITY WAIVER: I give permission for the Ross Ragland Theater to use the likeness or voice of my child in published format, including, but not limited to: Internet, newspaper, magazine, printed or recorded materials, and television.

I, the parent or guardian, have read this release and understand all of its terms, and I execute it voluntarily and with full knowledge of its significance.

Name of Child: _____

Emergency Contacts: Name: _____ Phone: _____

Name: _____ Phone: _____

Health Insurance Company and Policy # _____

Signatures of Parents or guardians _____

Date: _____