

EAGLE PERFORMING ARTS CENTER REGISTRATION FORM

Parents' Name: _____

Address: _____ City/Zip: _____

Tel. Home: _____ Work: _____ Emergency: _____

E-mail: _____

Are you a New or a Returning student? If New, how did you hear about EPAC? _____
 Current Academic School Attending and Grade Level _____

Student's name			
Birthdate			
Pre Ballet Sessions	\$165 Pre Ballet Sessions: 1 2 3 (circle one)		
Enrolling in the following classes:	1. 2.	1. 2.	1. 2.
Number of class hours			
Tuition payment			
Registration fee*	\$30	\$30	\$30
Performance fee *	\$65	\$65	\$65
Total per student			

*Registration fee and performance fee due with first tuition payment.

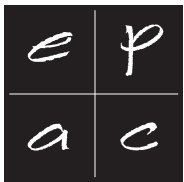
Check one please: Full Term Half Term Four-Payment Plan

Total due with registration: \$ _____

Payment Method: Cash Check Credit Card (MasterCard or Visa only) (\$5 Transaction Fee)

Card Number: _____ Total Amount: \$ _____

Exp. Date: _____ Signature: _____



EAGLE
PERFORMING ARTS
CENTER

Medical Consent: In the event of injury, I hereby authorize the program officials of the Eagle Performing Arts Center to arrange for medical services as may be deemed reasonable and necessary to the welfare of the injured, and I do hereby release the Eagle Performing Arts Center and all others from all liability in taking such action, including all action which may be contrary to personal religious beliefs. I, the undersigned, have read this Release and Consent to medical treatment and understand all its terms. I execute it voluntarily and with full knowledge of its significance.

Liability Release: I do hereby agree to release the Eagle Performing Arts Center and all other cooperating agencies, employees, officials, or managers thereof, from all liability for damages by reason of injuries or property damages that may be sustained as a result of participation in this program.

Photo Release: I, the undersigned, hereby give Eagle Performing Arts Center, its agents, and/or assignees permission to use the photographs, motion pictures or any reproductions of my physical likeness taken of me in any manner it deems proper. I relinquish all rights, title, and interest I may have in the finished pictures, negatives, and copies. I waive the right of prior approval and hereby release Eagle Performing Arts Center, its agents, and/or assignees from any and all claims from damages of any and all kinds based on the use of said material. I hereby warrant that I am a parent or legal guardian of the subject of photography, who is under eighteen years of age, and am competent to act in his/her behalf insofar as the above is concerned.

Signature of Parent/Guardian: _____ Date: _____