



## REGISTRATION

(Please Print)

CAMPER INFORMATION				
Student's last name:	First:	Middle:	Date of Birth:	Sex:
Street address:			Camper T-Shirt Size:	Home phone no.:
City:		State:	ZIP Code:	Grade Level:
School:		Would Your Camper Like a Large Role?		Is Your Camper Musical?
Email Address:				
Previous Acting Experience? (If so how much?)			Previous Dancing Experience? (If so how much?)	
Allergies, Medications, or conditions to be aware of:				
How Did You Hear About Our Camp?				
PLEASE NOTE: Summer Camp at the Sondheim is unable to provide an alternative lunch option for ay dietary food restrictions. Please send lunch for campers with dietary restrictions as refrigerator space will be provided. Initial _____				

PARENT/GUARDIAN INFORMATION		
(Information will be kept on file in case of emergency.)		
Parent/Guardian Name 1:	Address (if different):	Home phone
Email Address:		Cell phone
Parent/Guardian Name 2:	Address (if different):	Home phone
Email Address:		Cell phone

IN CASE OF EMERGENCY			
Name of local friend or relative (not living at same address):	Relationship to camper:	Home phone	Cell phone no

The above listed person will only be called if both parents/guardians cannot be reached during emergency

\_\_\_\_\_  
Parent/Guardian signature

\_\_\_\_\_  
Date



## Consent/Release Form

### Authorization for Medical Treatment

On behalf of my participating camper, I hereby give permission for any physician, hospital, or health care facility to provide medical care, treatment, and administer medication to participant as deemed necessary by a physician.

### Release of All Claims

I hereby release the Fairfield Arts and Convention Center and all of its agents, employees, officers, and directors from any and all risks, actions, causes of action, claims, demands, liabilities and obligations of any and every nature whatsoever, including, without limitation, for illness, personal injury, death, property damage, and personal or proprietary rights, and hereby hold the Fairfield Arts and Convention Center harmless and agree to fully indemnify the Fairfield Arts and Convention Center from and against any and all claims. I hereby personally assume full responsibility for any and all claims and for any and all hospital and medical bills for my participant.

### Consent to Use and Publication of Image

I hereby give the Fairfield Arts and Convention Center the absolute, unconditional, and irrevocable right and permission to use my name and participant's name and to use, reproduce, edit, exhibit, project, display, copyright, and publish, photographic images and/or moving pictures and/or videotape images of my participant, with or without voice, in which my participant is included, in whole or in part, photographed, taped, videotaped, and/or recorded prior to, during and/or after the theatrical event and to circulate same in any and all forms and media for art and advertising, and I hereby consent to the use of all printed matter in conjunction therewith and waive all rights to inspect and/or approve drafts, finished products, and/or editorial, promotional, and printed copy and sound tracks that may be used in connection therewith, and waive all rights to control any aspect of any production, alteration, use, distribution or disposition of said products, copy, and/or sound tracks, and hereby discharge and agree to hold the Fairfield Arts and Convention Center harmless and fully indemnify the Fairfield Arts and Convention Center from and against any and all claims arising by virtue of any blurring, distortion, alteration, optical illusion, or use in composite form, whether intentional or otherwise, that may occur or be produced in the production, processing, duplication, projecting, or displaying of said images of my participant, and from any and all claims for violation of any personal and all proprietary rights my participant may have or may claim to have in connection with such images and with the production, alteration, use, distribution, and disposition thereof.

### Please complete and sign below

Signature, parent or guardian \_\_\_\_\_

Printed Name \_\_\_\_\_

Child Name \_\_\_\_\_

Date \_\_\_\_\_

### Payment Information

*\$125 is due at registration night, July 15 or in advance of first day of camp, July 16 and includes aily lunch, snack, and camp T-shirt.*

\_\_\_\_\_ Payment enclosed, payable to Fairfield Arts & Convention Center

\_\_\_\_\_ Payment will be made at the Fairfield Arts & Convention Center, 200 N Main St. Monday – Friday, 8 a.m. – 5 p.m. with cash, credit or debit card. For questions, contact Lori Vaughan, 641-472-2000