

2019-2020 CLASS REGISTRATION FORM

Student Name: _____

Student Age: _____ Student Grade: _____ Parent Name: _____

Phone (_____) _____ Email _____

Street Address _____

Town: _____ State: _____ Zip Code: _____

_____ **Check here to be added to our mailing list!**

CLASSES:

_____ **Acting for Teens** (Ages 13-18) Wednesdays 5:30-7:30 pm (8 wks-2 hours) **\$235**

Register for (please check all if applicable):

___ **SESSION 1** ___ **SESSION 2** ___ **SESSION 3** ___ **SESSION 4** (Register & Pay for all 4 now at \$752 and save 20% off the session price)

_____ **Teen Theatre Experience** (Ages 13-17), Year-long program **\$250**

You will receive an email confirmation ahead of the first day of class. It will come from Director of Education Elizabeth Simmons via ESimmons@PlayhouseTheatreGroup.org. Please add this address to your approved senders list. Class descriptions and dates can be found on the website. All classes are held at The 224 EcoCenter, 224 Farmington Ave, Hartford, CT 06105. Park on the WEST side, enter through EAST. Visit the website for the inclement weather policy.

DISCOUNTS:

Sibling Discount: There is a 10% sibling discount. Pay full price for the first child. Save 10% on all additional children.

Full Year Discount: Register and pay for all four sessions of our popular classes and save 20% off the session price. *Payment Plan also available for yearly classes in two installments.

ADDITIONAL FEES:

Registration fee: There is a one-time annual \$15 registration fee per student

REFUNDS:

Registration fees are non-refundable. Tuition is refundable up until 5 days prior to the start of a class, workshop, program and/or master class. Tuition is non-refundable within 4 days prior to the start date unless you provide a doctors note. Requests for a refund must be made in writing. I agree to these terms:

Student Name (Parent if student is under 18): _____

Signature: _____

AMOUNT DUE:

Class/Workshop Fees: _____

Registration Fee: + _____

Sub Total: _____

Discount: - _____

TOTAL: _____

PAID: _____

BALANCE DUE 1/31: _____

PAYMENT METHOD:

Cash Check check # _____

Checks payable to Playhouse Theatre Group, Inc.

Credit Card _____ Exp: ____ / ____ CVV: _____

Billing Zip Code if different than the above address: _____

Each student receives one free T-shirt during the 2018-19 School Year. Size (circle one):

Child S Child M Child L Child XL Adult S Adult M Adult L

Mail or hand deliver your completed registration form to: Educational Programs c/o Playhouse on Park, 244 Park Road, West Hartford, CT 06119 or scan and email to: BoxOffice@PlayhouseonPark.org. To register over the phone with a credit card, call 860-523-5900 x 10.

WAIVER / PHOTO / INJURY RELEASE FORM

I grant Playhouse Theatre Group, Inc., its subsidiaries Playhouse on Park and Playhouse Theatre Academy, representatives and employees the right to take photographs and video of me in connection with the above-identified subject. I authorize Playhouse Theatre Group, Inc., its assigns and transferees to Copyright, use and publish the same in print and/or electronically. I agree that Playhouse Theatre Group, Inc. may use such photographs of me with or without my name and for any lawful purpose, including for example such purposes and publicity, illustration, advertising and Web content.

I understand that dance, theatre and vocal instruction requires physical exertion. I also acknowledge that injury may result during instruction, including but not limited to as a result of physical contact with other students, instructors, or fixed or movable objects, or the condition of the floor. I represent that I am medically and physically able to safely participate in dance and/or theatre classes, workshops, rehearsals, and performances and to meet the physical demands thereof. I agree to assume all risks associated with participating in dance and/or theatre instruction, workshops, rehearsals, and performances at or in connection with Playhouse Theatre Group, Inc. If, at any time hereafter, I have any medical or physical limitation or condition that might affect my ability to safely participate in dance and/or theatre classes, workshops, rehearsals, or performances, or meet the physical demands required thereof, I will make such limitations and conditions immediately known to Playhouse Theatre Group, Inc.

I grant consent for any PTG, Inc. instructor to apply physical contact to the student for the purpose of making any technical correction that is appropriate for dance instruction according to accepted artistic practices.

In view of the foregoing, and as a term and condition of receiving dance, theatre, and/or vocal instruction with Playhouse Theatre Academy at Playhouse on Park and/or The 224 EcoCenter, I, for myself, my spouse, heirs, legal representatives and assigns, expressly release, waive and discharge Playhouse Theatre Group, Inc., its officers, directors, employees, agents, successors, predecessors, sponsors, legal representatives and assigns, from all present and future claims, demands, actions, judgments, executions and liabilities of any kind, known or unknown, that now have, ever had or may have, or claim to have, against Playhouse Theatre Group, Inc., its officers, directors, employees, agents, successors, predecessors, sponsors, legal representatives and assigns, created by, as arising out of, any dance or theatre instruction, workshop, rehearsal, performance or related activity, regardless of where held or when held, even though such claim or liability may arise out of negligence or fault on the part of any of the foregoing persons or entities, breach of contract or otherwise, and whether for bodily injury, property damages or loss or otherwise. This release is for the entire premises of Playhouse on Park, including but not limited to the stage, dressing rooms, lobby, audience, bathrooms, sidewalks, stairwells, buildings and grounds.

Name of participant/student: _____

Name of parent/guardian (if student is under 18): _____

Signature: _____