	For office use only:
BROADWAY SACRAMENTO	Account#:
CAMP MUSIC CIRCUS	Payment #1
REGISTRATION FORM	2
July 9 to July 20, 2018	3
Ages 9 to 12	
Registration Fee: \$700.00	Date:In Roster:
Registration begins February 1, 2018	
Registration form and fee due by June 1, 2018	E-Mail confirmation:
MANDATORY ORIENTATION THURSDAY,	
June 28, 5:30 P.M. TO 7:00 P.M.	
Scholarship opportunities available	

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CONTACT INFORMATION (Please print clearly)

Child's Name:	Nickname:				
Grade in School:	_ Age:	Gender:	Birth Date:		
Parent/Guardian 1:			Parent/Guardian 2:		
Name:			Name:		
Address:			Address:		
City:	_State:Zip:		City:	_State:Zip:	
Cell:	_Work:		Cell:	_Work:	
Email:			Email:		
EMERGENCY INFORM	MATION				
Name of Emergency Contact			Cell Phone		
Medical Insurance Carrier			Policy #		
Are there any special medic accommodations?	cal conditions, chron	nic ailments, allero	gic reactions, physical di	sabilities or school IEP	
Please describe:					
Please list any medications	your child is taking:	:			

Permission to Provide Necessary Treatment or Emergency Care:

I hereby give permission to the medical personnel selected by Broadway Sacramento to order x-rays, routine tests, treatment, to release any records necessary for insurance purposes; and to provide or arrange necessary related transportation for my child. In the event I cannot be reached in an emergency, I hereby give permission for the physician selected by Broadway Sacramento to secure and administer treatment. I also understand and believe the child for whom this application is made to be in a condition of health and soundness of body that warrant undertaking the camp. I further agree to pay any and all costs associated with treatment not covered by my insurance.

Signature of parent/guardian

RELEASE OF LIABILITY

My child, ______ has permission to attend Camp Music Circus (July 9 – 20, 2018) at Music Circus and/or facilities of the Sierra Curtis Neighborhood Association and The 24th Street Theater. I understand that I am releasing Broadway Sacramento, the Sierra Curtis Neighborhood Association, The 24th Street Theater and the Camp Music Circus instructors and volunteers from any and all liabilities incurred while at the program.

AUTHORIZATION TO REPRODUCE PHYSICAL LIKENESS

I, ______, expressly grant to Broadway Sacramento and to its employees and agents the right to photograph, film or videotape my child and to use the resulting images in media promoting Broadway Sacramento and its activities.

I further grant the right to record and reproduce my child's voice and all instrumental, musical and other sound effects produced by my child. I hereby certify and represent that I have read the foregoing and fully understand the meaning and effect thereof.

Parent/Guardian Signature

Date

Print Name of Parent/Guardian

w did you hea	r about Camp Music Circ	us		
E-blast	Web Page	Friend	Magazine	Bway Sacramento Program
My child h	has participated in Camp	Му	child auditioned for	or Music Circus
Other				

Please return completed to Broadway Sacramento:

- 1) Registration Form
- 2) Registration Fee/Installment Payment Form
- Scholarship Application (if applicable)
 3(a) 250 word essay from participant
 - 3(b) Letter from parent/guardian

WE ACCEPT CASH, CHECKS PAYABLE TO BROADWAY SACRAMENTO, OR VISA, MASTERCARD, AMERICAN EXPRESS or DISCOVER. If you have any questions or to pay by credit card over the phone contact:

Joann Lewis at 916-446-5880, ext 147 or email jlewis @broadwaysacramento.com

Return registration form and fee to:

Broadway Sacramento ATTENTION: Camp Music Circus

1510 J Street, Suite 200 Sacramento, CA 95814 Fax: 916-446-1370

CMT reserves the right to exercise discretion in accepting applicants.

Payment Installment Form (Return with Application)

If you wish to pay in installments, we accept three installment payments for Camp Music Circus. The first payment of \$240.00 for Camp Music Circus is due with the application and the remaining payments of \$230.00 will be due on April 27 and June 8, 2018. **PLEASE NOTE that the initial payment is non-refundable as it secures a space in the camp.**

Please sign me up for installment payments

Parent's Signature

Office Use Only:

Payment:		
Amount:		
Installments:	Y	Ν

1._____

2._____

3._____