

Village Productions/Tri-PAC
2011-12 Group Instruction Registration Form
P.O. Box 1325, 245 E. High Street, Pottstown, PA 19464
610.970.1199; www.tripac.org

Continuing Village Productions Student

New Village Productions Student

Name: _____

If Under 18: Birthdate (include year): _____ Current Age: _____ Current Grade: _____

Parent/Guardian (if under 18): _____

Address (including zip!): _____

Email: _____

Primary Phone: _____ Alternate Phone: _____

Ethnicity (optional, helps us know our student population): _____

CLASS SELECTION

Group Class 1: _____

Class Fee: \$ _____ Materials Fee: \$ _____ Day/Time of Class: _____

Group Class 2: _____

Class Fee: \$ _____ Materials Fee: \$ _____ Day/Time of Class: _____

Total Group Class Fees

(from Class Selection section, above): \$ _____

Annual Registration Fee (\$20/year per student for group, summer camp, & private instruction from July 1-June 30):
\$ _____

Annual Fund Donation (Optional. Thank you for supporting the Tri-PAC!):
\$ _____

Total Payment Due: \$ _____

PAYMENT METHOD:

CHECK PAYMENT (Please make check payable to "Village Productions")

Check Number: _____ Amount: \$ _____

CREDIT CARD PAYMENT: (If paying by credit card, please complete last page)

Physical Limitations: Please list any student physical limitations of which we should be aware (e.g., asthma, heart condition, food or other allergies): _____

Medical Information: Please circle and explain all that apply.

Bee sting allergies yes no
 Other allergies yes no If yes, please explain: _____
 Subject to seizures yes no If yes, please explain: _____
 Taking medication yes no If yes, please explain: _____
 Diabetic yes no If yes, please explain: _____
 Date of last tetanus shot: _____

Emergency Contact Information: (please print) _____

Consent & Release: _____ (insert name of student) (and the student's Parent or Legal Guardian in the case of a minor child, on the Parent or Legal Guardian's and the minor child's behalf, collectively referred to as the Student), by signing below, and in consideration of Village Productions making educational opportunities available to the Student, hereby consent to and represent the following:

By registering with Village Productions, Student agrees to abide by all policies and procedures as outlined in printed materials and on the Village Productions website, including 2011-12 registration procedures, payment policies, and school calendar. The Student shall be responsible for timely payment of tuition outlined above, and understands and agrees that tuition and fees are nonrefundable. Student further allows the taking of photographs, recordings, film and/or other media in which the Student appears for any purpose including but not limited to promotional purposes and release via the internet and/or other media outlets, without further notice, permission, or compensation. Student further represents that he/she is adequately covered by a personal or family medical plan which includes coverage for hospitalization, medical expenses, and other related expenses which may arise from Student's participation in the Program, and that Student shall present proof of said coverage if necessary. Student grants Village Productions (and their officers, employees, agents, volunteers, independent contractors, and Board members), permission, in their discretion, to release medical information to the program staff or others deemed necessary and in the interests of the Student, and to seek and authorize emergency medical treatment for Student, and agrees to assume all medical costs incurred. Student has attached any additional important medical information about the Student to this form. Student further agrees to release, indemnify and hold harmless Village Productions (and its officers, employees, agents, volunteers, and Board members), from and against any and all claims, demands, liabilities, losses or expenses, including attorneys fees, and including any injury to Student or another party, associated with Student's participation in educational opportunities (including but not limited to those arising in connection with equipment or facilities, and those arising from a third party due to Student's own conduct). The Student further agrees that if any part of this agreement is found by a court or other appropriate authority to be invalid, the remainder of the agreement nevertheless will remain in full force and effect. The Student further acknowledges that Student has read and understood this Consent and Release, and voluntarily agrees to be legally bound by its terms.

Signature of Student: _____ **Date:** _____

Name of Parent or Guardian (if Student is under 18): _____

Signature of Parent or Guardian: _____ **Date:** _____

Note: Village Productions reserves the right to change, withdraw or modify classes, workshops, and lessons.

Office Use Only

<u>Class Code</u>		<u>Payment Type</u>
<u>Ck#</u>	<u>Amount</u>	<u>Balance</u>
<u>CC Process Date</u>		<u>CK. Deposit Date</u>
	<u>QB Receipt #</u>	

