

Education Class Application

Applicant Information

Student Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Phone: _____ Email _____

Emergency Contact Name #1 / Relationship _____

Phone Number: _____ Alternate Phone Number: _____

Emergency Contact Name #1 / Relationship _____

Phone Number: _____ Alternate Phone Number: _____

I'd like to register for the following (check all that apply):

Youth Spring

- Ages 8-12 \$400
- Ages 13-18 \$400

Youth Fall

- Ages 8-12 \$400
- Ages 13-18 \$400

Youth Summer Conservatory

- Ages 14-18 \$800

Adult Spring

- Ages 19+ \$200

Adult Fall

- Ages 19+ \$200

I would like to apply for a child and/or an adult scholarship (additional form).

Please list any known medical conditions or food allergies we should be aware of:

Payment Amount: \$ _____

Type: Visa MC Discover Check Scholarship

Card #: _____ Exp: ___ / ___ Signature: _____

Participant / Parental Agreement and Consent

In consideration of being allowed to participate in Harlequin Productions' Education Program, parent and/or participant agrees to the following:

- 1) This program requires a commitment of five (5) weeks, two (2) evenings a week for two (2) hours, plus any homework that may be assigned. The Participant is required to attend all sessions to achieve their goal(s).
- 2) The participant is expected to be present with all required materials and ready to work on time for each session and failure to do so may result in participant being sent home from that session.
- 3) Parent and/or participant hereby agree to appear, defend, indemnify, and hold harmless Harlequin Productions, its staff, and its guest instructors from any and all liability from damages, loss or injuries, either to person or property, which may be caused or alleged to have been caused by participant while engaged in any activity in connection with the Harlequin Productions Education Program.
- 4) Parent and/or participant acknowledge that there are risks associated with theater activities. Parent and/or participant agree to release Harlequin Productions from all liability related to injury including possible permanent disability or death related in any way to participating in the Education Program. Parent and/or participant assume all risk related to participation in the Education Program both known and unknown and expressly assumes the risk that others, including staff, employees or Harlequin or instructors and assistants in the program could act negligently in performance of their duties. Parent and/or participant waives and releases Harlequin from any claim for negligence to the fullest extent permitted by law.
- 5) Parent and/or participant affirm that participant is capable of participating in the workshop.
- 6) Parent and/or participant further agree in case of injury or illness or any action requiring parental permission, Harlequin staff shall have the authority to act for parent and/or participant in the case the parent cannot be reached and/or participant is unable to act on his or her own behalf. However, any medication needs a child may have should be taken care of before or after classes. Harlequin staff will not administer any medications to youth or adult participants.
- 7) Parent and/or participant further agree that in case of injury, illness, or the need for disciplinary action, Harlequin Productions staff will, if deemed necessary, send participant home by the first available transportation at parent's/participant's expense.
- 8) Parent and/or participant understand that some plays contain mature content which may be discussed or performed as part of a particular session.
- 9) Email address for parent or participant age 18 and over is required for the Education Program for dissemination of information, updates, and notices. Under-aged child email address is at the discretion of the parent.

Parent or Participant age 18 or older email address: _____

Participant under age 18 email address as permitted by parent: _____

- Please send me informational emails. Harlequin does not share email addresses with any other organization.
- Please do not send me Harlequin Productions informational emails.

The undersigned agrees that Harlequin Productions may utilize photographed or videography images of participant for promotional purposes in connection with the Education Program, without compensation.

Initial here _____

The undersigned agrees that Harlequin Productions may utilize excerpts of participants' writing for promotional purposes in connection with the Education Program, without compensation.

Initial here _____

If any provision of this agreement is determined to be unenforceable the remaining provisions remain in full force and effect.

Agreed:

Parent or Legal Guardian Signature Date
(If student is under 18 years of age)

Agreed:

Participant Signature Date