

## Second Generation Theatre 2018-2019 Class Registration

Hosted by Kenmore Presbyterian Church 2771 Delaware Ave Kenmore NY 14217

Student's Full Name	e:						
		Boy	Girl				
Parent/Guardian Fu	II Name:						
Address:		Apt					
City:	State:	Zip Code:	<del> </del>				
Mobile:	Home:						
	Email:						
Emergency Contact	and Number:						
Please list all know	n allergies, physical limitat	ions, and concerns:					
ENROLLING IN:	SING WITH ME	MUSICAL THEAT	RE				
September 20- Nove	ember 8 Session \$125/ 8 we	eek session					
☐Musical Theatre (Thu	ırsday 4-5)	(Thursday 5-6)					
		k session, 2nd class @ \$9	0				
SIBLING DISCOUN	<b>IT</b> * \$125/8 week session,	2nd child @ \$90					
Total Fee (to be comp	oleted by SGT)						
• •	due at time of registration. Onless special arrangements	Outstanding balance is expectare made in advance.	cted by the end of				
Amount Paid Today	y: Outstanding Balance:						

Payment Options: Credit Card Number:			=		Check (#)
Expiration Date:		3 Digit Sec	urity Code		<del></del>
Sign to accept that yo					
Payment can be sent	to 40 Al	legany Ave, Ke	enmore NY	14217 or	handed in in person.
Signature					
PLEASE READ CLA	SS POL	ICIES & SIGN	WAIVER:		
<ul> <li>start date of th</li> <li>Students are e and staff are to</li> <li>PLEASE be re other than wat</li> <li>Please notify S a student is go</li> </ul>	e class expected be treadespectful er are pectful sing to mi	to be on time a ted with respec of Kenmore Pr ermitted in the o '16) 508-SGT0 iss class <b>OR</b> if	and ready to et esbyterian classroom or second you will be	o particip 's space- generatio late picki	ate! All SGT students no gum, food, or drinks ontheatre@gmail.com if ing them up. Our angements will have to
WAIVER					
Second Generation T legally held responsible adult caregiver accompane on this docume while attending all SG	ole for an npanying ent, you a	y illness, accid y your child, and agree to accept	ents, or inj d your child	ury that m d. By sign	ing or printing your
I have read the class on this registration for	•		•	•	em. All the information
Parent/Guardian Sig	gnature:				



## Second Generation Theatre Photo Release Form

I hereby authorize Second Generation Theatre Company, Inc. (SGT) to publish the photographs taken of me and/or the

undersigned minor children, and our names, for use in SGT's printed publications and website.

I release SGT from any expectation of confidentiality for the undersigned minor children and myself and attest that I am the parent or legal guardian of the children listed below and that I have the authority to authorize SGT to use their photographs.

I acknowledge that since participation in publications and websites produced by SGT is voluntary, neither the minor children nor I will receive financial compensation.

I further agree that participation in any publication and website produced by SGT confers no rights of ownership whatsoever. I release SGT, its officers, trustees, and its employees from liability for any claims by me or any third party in connection with my participation or the participation of the undersigned minor children.

Student(s)	
Parent/Guardian Signature:	Date: