

REGISTRATION FORM/LIABILITY RELEASE
Choir Year 2017-2018



Date: _____

Chorister Name: _____ Age: _____ Birthdate: ___/___/___

Address: _____ Girl _____ Boy _____

City State Zip

Primary Phone _____ Cell Phone (parent) _____ Cell Phone (chorister) _____

Okay to Text? _____ Okay to Text? _____

Level: Piccolini Grazioso Spirare ABC

School Name: _____ Grade Level as of 9/1/17: _____

Parent/Guardian Information:

Name _____ Employer: _____ work phone: _____

Name _____ Employer: _____ work phone: _____

Parent E~mail: _____ Student E~mail: _____

I give permission for SAYC to share the above information with choir families. Yes No

EXPECTATIONS AND COMMITMENTS: Membership in the SAYC requires a full commitment from each member and his/her parents. Regular attendance is the most important aspect of a choir member's participation and progress in the chorus. Please report absences to the SAYC office **prior** to rehearsal. Volunteering and fundraising are requested of all families. More information is included in the handbook and tuition agreement.

EMERGENCY AUTHORIZATION: If neither parent, or, if applicable, the guardian of a chorister can be reached, I hereby authorize the Spokane Area Youth Choirs or its agents or volunteers to take my child/ward to the nearest available physician or facility for medical treatment in the event of any emergency. I authorize any licensed physician or medical facility to treat my child or ward.

_____ **initial here** and sign on reverse

If your child has a life-threatening condition (allergy, asthma, diabetes, etc), please indicate below and contact the office to complete a more detailed health information form.

Health concerns, allergies or disabilities of child/ward:

(Continued on reverse side)

LIABILITY RELEASE FORM

I, the parent or guardian of the named child/ward, give my permission for his/her participation in all activities, rehearsals and performances of the Spokane Area Youth Choirs.

I hereby release and discharge the Spokane Area Youth Choirs, its agents, directors, and volunteers who participate in or conduct activities on behalf of the Spokane Area Youth Choirs from all claims, demands or actions which the parent or guardian's heirs, executors, administrators or assigns may have against the Spokane Area Youth Choirs, its successors or assigns, for all personal injuries, known or unknown, to my child/ward and injuries to property, real or personal, caused by or arising directly or indirectly out of any activities conducted by the Spokane Area Youth Choirs, including, but not limited to, scheduled activities, rehearsals and performances.

PUBLICITY WAIVER: I give permission for the Spokane Area Youth Choirs to use the likeness or voice of my child/ward in published format, including, but not limited to: Internet, newspaper, magazine, printed or recorded materials, and television.

I, the parent or guardian, have read this registration and release and understand all of its terms, and I execute it voluntarily and with full knowledge of its significance.

Emergency Contact: Name: _____ Phone: _____

Health Insurance Company and Policy # _____

Signature of Parent or guardian _____

Signature of Parent or guardian _____

Date: _____

Registration Fee and Uniform

ABC Program – Include registration fee only. T-shirt will be provided.

Polo Shirts – This is part of the informal uniform for both boys and girls and the formal uniform for Piccolini & Grazioso Choirs. Required for new members. Replace as needed for returning members.

Sizes Available: Youth M (10-12), Youth L(14-16), Adult S, M, L, XL

Vest Rentals – Formal vest worn by Piccolini and Grazioso choristers & boys of Spirare. Annual fee covers creation, maintenance and cleaning costs.

Other Uniform – Your student will be measured at the beginning of the choir season. Fees vary.

Please include payment for all that apply: {For shirt size use code YM, YL, S, M, L, XL}

Registration	Vest Rental \$10	Polo Shirt (if needed)\$15	Shirt Size	Total
\$40				

Complete and return this form with fees to:

SAYC

411 S. Washington St

Spokane, WA 99204

509-624-7992 Fax: 509-624-8028

office@SAYChoirs.org

For Office Use:

Check # _____ Cash Visa/MC

Payment Amount: _____ Date: _____