

Student Information

Name _____ Age _____

Address _____

City _____ State _____ Zip _____

Home Phone _____ Email Address _____

(For class cancelations, rehearsal changes, etc.)

School Attended _____

Student Gender (Please mark one): Male Female Prefer Not To Specify/Other

Student Race/Ethnicity (Please mark any that apply)

White/Caucasian

Black/African American

Native American/American Indian

Hispanic/Latino

Asian/Pacific Islander

Bi/Multiracial (I have marked boxes that apply)

I identify as: _____

Guardian Information

Guardian Name _____

Address (if different from above) _____

City _____ State _____ Zip _____

Cell/Home Phone _____ Email Address _____

Second Guardian Name (as needed) _____

Cell/Home Phone _____ Email Address _____

Student Medical Information

Medical Information (Allergies and other important info) _____

Does your child have any learning or behavioral differences we should be aware of, so we can arrange for their best experience? If Yes, please note or write "contact me" so we can make arrangements.

In Case of Emergency, please contact (If guardians cannot be reached):

Primary Contact _____ Relationship _____ Phone Number _____

Photo/Liability Waiver

My child has permission to participate in Children's Theatre Workshop. CTW has the right to use photos of my child for promotional purposes. Photos could be from classtime, rehearsals, performances, etc. I understand that in the event of an emergency, every effort will be made to contact the people named above, but CTW reserves the right to exercise judgment in calling 911 in the case of an emergency.

I understand that my child's participating in CTW is potentially hazardous, and I assume full and complete responsibility for any injury or accident which may occur while my child and I are traveling to or from CTW events, during CTW events, or while I am on the premises of a CTW event. I am also aware of and assume all risks associated with my child's participating in CTW and CTW's events. I understand and agree that in consideration of my child's being permitted to participate in the event, that I, for myself, my child, and my heirs and executors, hereby waive, release, and forever discharge CTW, and its directors, agents, representatives, successors, and assigns, and all other persons associated with CTW and a CTW event, from all liabilities, claims, actions, or damages that I or my child may have against them, arising out of or in any way connected with my child's participation in CTW. I understand that CTW expressly disclaims all warranties of any kind, express or implied. I acknowledge and agree that I am signing this Agreement and Waiver freely and voluntarily, and intend my acceptance to be a complete and unconditional release of all liability to the greatest extent allowed by law.

I further understand that the fee is non-refundable and non-transferable.

Parent/Guardian Signature _____ Date _____

CTW Class Selection (Check all that apply)

- | | |
|---|--|
| <input type="checkbox"/> 5-6 Year Old Camp, June 18-22, 2018 | <input type="checkbox"/> 5-6 Year Old Camp, July 23-27, 2018 |
| <input type="checkbox"/> 7-9 Year Old Camp, June 11-15, 2018 | <input type="checkbox"/> 7-9 Year Old Camp, July 9-13, 2018 |
| <input type="checkbox"/> 7-9 Year Old Camp, July 30-August 3, 2018 | <input type="checkbox"/> 10-14 Year Old Camp, June 25-29, 2018 |
| <input type="checkbox"/> 10-14 Year Old Camp, July 16-20, 2018 | <input type="checkbox"/> Stage Makeup Camp, June 18-22, 2018 |
| <input type="checkbox"/> Improv Camp Ages 10-12, June 18-22, 2018 | <input type="checkbox"/> Improv Camp Ages 13-16, June 18-22, 2018 |
| <input type="checkbox"/> Costuming Camp, Ages 10-18, July 9-13, 2018 | <input type="checkbox"/> <i>James and the Giant Peach</i> , Ages 10-18, June 4-July 28, 2018 |
| <input type="checkbox"/> Disney's <i>The Little Mermaid</i> , Ages 13-18, June 4-July 8, 2018 | |

Tuition Payment Plan

Student's Name: _____

Please choose one Payment Plan:

Early Bird Full Payment Discount (Payment due upon registration)

Program	Amount Due	Date Paid	Amount Paid	Pay Method	Amount of camps
5-6 Year Old Camp	\$90 per camp				
7-9 Year Old Camp	\$160 per camp				
10-14 Year Old Camp	\$160 per camp				
Stage Makeup Camp	\$90 per camp				
Improv Camp	\$35 per camp				
Costuming Camp	\$90 per camp				
<i>James and the...</i>	\$170 per camp				
<i>The Little Mermaid</i>	\$170 per camp				

Installment Payment Plan

(50% due at registration, 25% due two weeks before camp starts, balance due on first day of camp)

Program	Amount Due	Date Paid	Amount Paid	Pay Method	Amount of camps
5-6 Year Old Camp	\$50 per camp				
7-9 Year Old Camp	\$85 per camp				
10-14 Year Old Camp	\$85 per camp				
Stage Makeup Camp	\$50 per camp				
Improv Camp	\$20 per camp				
Costuming Camp	\$50 per camp				
<i>James and the...</i>	\$90 per camp				
<i>The Little Mermaid</i>	\$90 per camp				

****Please Note: If you require the sibling discount or the sibling discount combined with the installment plan, please contact CTW's Office Manager at cdanford@ctwtoledo.org****

Payments to CTW may be made by cash, check, or money order. A service charge of \$35.00 (thirty-five dollars) will be assessed for each incident of any check returned for insufficient funds. CTW reserves the right to assess a monthly service fee of 6% (six percent) on the total balance of monies due and/or take legal action to recover the debt and any or all costs, including attorneys' fees, incurred by CTW for such action.

Money Orders and Checks to be made payable to: "Children's Theatre Workshop" or "CTW."

I hereby agree to the payment plan selected above.

Parent/Guardian's Signature _____ Date _____

Parent/Guardian's Name (Printed) _____