

Prospective Student's Name (*Last name, First name*) PLEASE PRINT



# Singers ONSTAGE! Registration Form

## Student Information

Full Name

Address

City

State

Zip

Country (if other than USA)

Home Phone

Date of Birth

Grade (as of 9/1/15)

Gender (*circle one*):    Male    Female

*Each registration includes two T-shirts, professional makeup (see Student Complexion Type below), and one pair of black cloth performance shoes. So that we may order appropriately, please provide the following information:*

**Student T-shirt Size** (*select one*):

- Youth Large
- Adult Small
- Adult Medium
- Adult Large
- Adult X-Large
- Adult XX-Large

**Student Complexion Type** (*if unsure, select Medium*)

- White—Fair
- White—Medium
- White—Tan
- Olive—Medium
- Olive—Deep
- Black—Medium
- Black—Dark

**Shoe Size** (*write size on line*):

- Girl's \_\_\_\_\_
- Women's \_\_\_\_\_
- Boy's \_\_\_\_\_
- Men's \_\_\_\_\_

## Parent/Guardian Information

### MOTHER/GUARDIAN

### FATHER/GUARDIAN

Mother's Name

Father's Name

Address

Address (if different)

Address cont.

Address cont.

City, State, Zip

City, State, Zip

Country (if other than USA)

Country (if other than USA)

Daytime Phone

Daytime Phone

Evening Phone

Evening Phone

Cell Phone

Cell Phone

Email

Email

Prospective Student's Name (*Last name, First name*) PLEASE PRINT



Email PLEASE PRINT

## Registration Form (continued)

*Please enroll my child in the Singers ONSTAGE! Performing Arts Day Camp*

		AMOUNT
<input type="checkbox"/> <b>Early Registration — SAVE \$100!</b> <i>Registration Forms and full payment <b>DUE BY FEBRUARY 9</b></i>	\$800	_____
<input type="checkbox"/> <b>Early Registration Payment Plan — SAVE \$100!</b> <i>Registration Forms and two checks (\$400 and \$400, to be deposited _____ and _____) <b>DUE BY FEBRUARY 9</b></i>	\$400 \$400	_____ _____
<input type="checkbox"/> <b>Regular Registration</b> <i>Registration Forms and full payment <b>DUE BY MARCH 16</b></i>	\$900	_____
<input type="checkbox"/> <b>Volunteer Buy-out Fee</b> <i>(See Policies page in booklet for more information)</i>	\$100	_____
	<b>ORDER TOTAL</b>	_____
<input type="checkbox"/> My check(s) is/are attached to Harnes Selway Arts		

### *Please READ, SIGN, and DATE*

- I am willing and able to host a child from outside the Washington metropolitan area for the duration of the Singers ONSTAGE! Operetta and Performing Arts Day Camp.

Harnes Selway Arts (HSA) reserves the right to cancel the Singers ONSTAGE! Operetta and Performing Arts Day Camp if there is insufficient enrollment. In such case, registration and volunteer fees paid will be refunded. Audition fees will not be refunded.

I have received a copy of the Singers ONSTAGE! Policies. I understand and agree to observe the Singers ONSTAGE! Policies.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

*Please mail the following to: Harnes Selway Arts, 2128 McKay St., Falls Church, VA 22043*

1. Registration Form
2. Student Medical and Emergency Contact Information Form (including Doctor and Insurance Information side)
3. Parent Volunteer Form
4. Permission, Consent, and Hold Harmless Agreement
5. Your payment

\_\_\_\_\_  
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# Student Medical and Emergency Contact Information

*In case of emergency, contact:* PLEASE PRINT

\_\_\_\_\_  
Emergency Contact Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Country (if other than USA)

\_\_\_\_\_  
Daytime Phone

\_\_\_\_\_  
Evening Phone

\_\_\_\_\_  
Cell Phone

\_\_\_\_\_  
Email

## Parent/Guardian Information

MOTHER/GUARDIAN

FATHER/GUARDIAN

\_\_\_\_\_  
Mother's Name

\_\_\_\_\_  
Father's Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address (if different)

\_\_\_\_\_  
Address cont.

\_\_\_\_\_  
Address cont.

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Country (if other than USA)

\_\_\_\_\_  
Country (if other than USA)

\_\_\_\_\_  
Daytime Phone

\_\_\_\_\_  
Daytime Phone

\_\_\_\_\_  
Evening Phone

\_\_\_\_\_  
Evening Phone

\_\_\_\_\_  
Cell Phone

\_\_\_\_\_  
Cell Phone

\_\_\_\_\_  
Email

\_\_\_\_\_  
Email

**Please complete the next page—"Doctor and Insurance Information"—and attach to this form.**

**Medical Information Form, Page 1 of 2**

\_\_\_\_\_  
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## Student Medical and Emergency Contact Information (continued)

### Doctor and Insurance Information

\_\_\_\_\_  
Primary Doctor's Name

\_\_\_\_\_  
Doctor's Phone Number

\_\_\_\_\_  
Medical Insurance Company

\_\_\_\_\_  
Insurance Company Phone

\_\_\_\_\_  
Policy Number

\_\_\_\_\_  
Group Number

### General Health and Medical Information

Does your child have any special dietary requirements? (*circle one*) **NO** **YES** If yes, please explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Does your child have any allergies to drugs or foods? (*circle one*) **NO** **YES** If yes, please explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Does your child have emotional/medical/educational conditions or issues? (*circle one*) **NO** **YES** If yes, please explain:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Does your child take any prescription or over-the-counter medications? (*circle one*) **NO** **YES**

If yes, please list all drugs and medications and their dosages:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If medications need to be taken during the camp, will you authorize a staff member to administer said medications, or will you administer the medications? (*circle one*) **STAFF** **PARENT**

### Authorized Signatures:

\_\_\_\_\_  
Mother's signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Father's signature

\_\_\_\_\_  
Date

OR

\_\_\_\_\_  
Legal Guardian's signature

\_\_\_\_\_  
Date

**Medical Information Form, Page 2 of 2**

# Parent Volunteer Form

Volunteerism is the backbone of the Singers ONSTAGE! Operetta and Performing Arts Day Camp. We know you will enjoy being involved along with your child in our program. The Singers ONSTAGE! faculty and singers cannot mount the production without your help.

**All families are asked to assist in five areas:**

- (1) Provide snacks/drinks for 40 (2 snack breaks daily) for one day
- (2) Serve as a lunch monitor
- (3) Set-up or clean-up facility rooms or help set up the stage for **Ruddigore** after the Thursday evening Showcase Performance
- (4) Sign up for a job on the pre-production/marketing or production teams AND
- (5) Strike set, pack up costumes, or clean up and restore facility after the **Ruddigore** performance

If your family's schedule makes it impossible for you to assist, you have the option of paying the Volunteer Buy-Out Fee. (Check appropriate boxes on the backside of this form, as well as the "Volunteer Buy-out" box on Registration Form)

## Daily Camp Assistance

**1. STUDENT SNACKS** — Please check day that you can bring student snack/drink for 40:

Sunday, July 12 (*one snack break this day*)

**Two Breaks Each Day:**

- |                                             |                                             |                                            |
|---------------------------------------------|---------------------------------------------|--------------------------------------------|
| <input type="checkbox"/> Monday, July 13    | <input type="checkbox"/> Friday, July 17    | <input type="checkbox"/> Thursday, July 23 |
| <input type="checkbox"/> Tuesday, July 14   | <input type="checkbox"/> Monday, July 20    | <input type="checkbox"/> Friday, July 24   |
| <input type="checkbox"/> Wednesday, July 15 | <input type="checkbox"/> Tuesday, July 21   |                                            |
| <input type="checkbox"/> Thursday, July 16  | <input type="checkbox"/> Wednesday, July 22 |                                            |

**2. SNACK/LUNCH MONITORS** — Please check day that you can serve as a monitor:

- |                                             |                                            |                                             |
|---------------------------------------------|--------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> Sunday, July 12    | <input type="checkbox"/> Thursday, July 16 | <input type="checkbox"/> Wednesday, July 22 |
| <input type="checkbox"/> Monday, July 13    | <input type="checkbox"/> Friday, July 17   | <input type="checkbox"/> Thursday, July 23  |
| <input type="checkbox"/> Tuesday, July 14   | <input type="checkbox"/> Monday, July 20   | <input type="checkbox"/> Friday, July 24    |
| <input type="checkbox"/> Wednesday, July 15 | <input type="checkbox"/> Tuesday, July 21  |                                             |

**3. PRE-PRODUCTION/MARKETING/ADMINISTRATION**

- |                                                                                                                                                                                                                                                                                                                                                |                                                                                                                                                                             |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> <b>Ruddigore</b> Publicity: <ul style="list-style-type: none"><li><input type="checkbox"/> Press Releases (writing, faxing, mailing, etc.)</li><li><input type="checkbox"/> Direct Mail (labeling, stamping, mailing, etc.)</li><li><input type="checkbox"/> Posting flyers at area stores, libraries, etc.</li></ul> | <input type="checkbox"/> Administration: <ul style="list-style-type: none"><li><input type="checkbox"/> Photocopying</li><li><input type="checkbox"/> Run errands</li></ul> |
| <input type="checkbox"/> Musical Preparation: <ul style="list-style-type: none"><li><input type="checkbox"/> Sorting music, etc.</li><li><input type="checkbox"/> Preparing musical scores</li><li><input type="checkbox"/> Sorting music after the camp</li></ul>                                                                             |                                                                                                                                                                             |

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## Parent Volunteer Form (continued)

### Daily Camp Assistance (cont.)

#### 4. PRODUCTION

- |                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                                                                                                                                                                                                                      |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Costume Construction:<br><input type="checkbox"/> Measuring <input type="checkbox"/> Altering<br><input type="checkbox"/> Sewing <input type="checkbox"/> Finding Fabric/Notions/<br><input type="checkbox"/> Fitting              Rental Costumes/Thrift Shops                                                                              | <input type="checkbox"/> Technical Crew:<br><input type="checkbox"/> Finding or making props<br><input type="checkbox"/> Running the show<br><input type="checkbox"/> Assistant Stage Manager                                                                                                        |
| <input type="checkbox"/> Make-Up/Wardrobe:<br><input type="checkbox"/> Applying make-up<br><input type="checkbox"/> Styling hair<br><input type="checkbox"/> Sort and hang up costumes by category<br><input type="checkbox"/> Iron costumes<br><input type="checkbox"/> Help singers get into and out of costumes<br><input type="checkbox"/> Return rental costumes | <input type="checkbox"/> Showcase Performance Usher:<br><input type="checkbox"/> Distribute programs and acts as a monitor during the performance<br><br><input type="checkbox"/> Usher:<br><input type="checkbox"/> Tears tickets, distributes programs, and maintains order during the performance |

#### 5. **Ruddigore** PERFORMANCE EVENING — Please check which job you would like to do:

- |                                                                    |                                                                                   |
|--------------------------------------------------------------------|-----------------------------------------------------------------------------------|
| <input type="checkbox"/> Pack up costumes                          | <input type="checkbox"/> Clean up and restore Dressing Rooms (includes vacuuming) |
| <input type="checkbox"/> Pack up props                             | <input type="checkbox"/> Clean and restore Stage Area (includes vacuuming)        |
| <input type="checkbox"/> Load boxes of costumes and props into van | <input type="checkbox"/> Clean up and restore the areas (TBA)                     |

What's the best way to contact you?

\_\_\_\_\_

Phone

\_\_\_\_\_

Time of day

\_\_\_\_\_

Email

- We prefer to opt out of volunteer duties. Our registration check includes an additional \$100 fee for the Volunteer Buy-Out Fee (*Please check appropriate box on Registration Form as well*)

Prospective Student's Name (*Last name, First name*) PLEASE PRINT



# Permission, Consent and Hold Harmless Agreement

I, the undersigned, hereby certify that I am the parent or legal guardian of the child ("my child") named above and do hereby grant permission for my child to participate in all Singers ONSTAGE! Operetta and Performing Arts Day Camp (SO) and Harnes Selway Arts (HSA) activities (July 12-25, 2015).

My child and I have discussed what is to be her or his proper conduct for SO and HSA activities, and my child has agreed to observe any and all rules which have been or may be established by the directors and Camp Coordinator. I represent that my child is emotionally and physically capable of participating in the SO and HSA activities.

During SO and HSA activities, I hereby grant to the adult who has been entrusted the care of my/our minor child limited power of attorney for the following exclusive purpose: to give consent for X-ray examinations, anesthetic, medical, surgical, or dental diagnosis and/or treatment, or hospital care and/or admission for the named minor under his or her general or specific supervision and on the advice of any physician or dentist licensed under the provisions of state and/or federal laws or on the medical staff of a licensed hospital.

I agree to accept responsibility for and further agree to pay for any and all costs and expenses incurred in connection with such medical and dental services rendered to the above-named minor pursuant to this authorization.

I hereby give permission for my child to ride in any vehicle designated by the adult in whose care the minor has been entrusted while attending and participating in this program.

In consideration of the acceptance of my participation (and/or the participation of my child or ward) in SO, **I AGREE TO ASSUME THE RISKS** incidental to such participation and, on my behalf, (and on behalf of my child or ward), and on behalf of my (and my child's or ward's) heirs, executors, and administrators, **RELEASE** and forever discharge the released parties defined below, of and from all liabilities, claims, actions, damages, costs, or expenses of any nature arising out of or in any way connected with my participation (and/or the participation of my child or ward) in such activity, and further agree to indemnify and hold each of the released parties harmless against any and all such liabilities, claims, actions, damages, costs, or expenses, including, but not limited to, attorneys' and other professionals' fees and disbursements. The released parties are Harnes Selway Arts, BalletNova Center for Dance, and the officers, directors, employees, agents, representatives, successors, and assigns of Harnes Selway Arts and BalletNova Center for Dance.

I understand that this release and indemnity includes any claims based on the negligence, action or inaction of any of the above released parties, and covers bodily injury (including death) and property damage, whether suffered by me (and/or my child or ward) before, during, or after such participation. I further authorize Harnes Selway Arts to obtain first aid or other medical treatment for myself or said child or ward, at my cost, as the need arises.

I understand that SO and HSA have the right to photograph, and make audio and video recordings of my child or ward during rehearsals, performances, or other events associated with the Day Camp, aforementioned. I hereby grant and represent and warrant to Harnes Selway Arts that I have the right to grant Harnes Selway Arts and its successors, affiliates, licenses, and assigns, forever and throughout the world, the right to use my (or my child's or ward's) likeness, performance, and biography of me (and/or my child or ward) as Harnes Selway Arts may desire, in all media, whether now known or hereafter devised, throughout the universe in perpetuity without further compensation to me (and/or my child or ward) or any limitation whatsoever.

This agreement shall be binding upon my heirs, personal representatives, and assigns, and me and shall be governed by and construed under the laws of the State of Virginia without regard to conflicts of law principles. Venue for any legal action arising out of or pursuant to this Agreement shall be in Fairfax County, Virginia, and jurisdiction shall be vested exclusively in the Circuit Court of the 19th Judicial Circuit in and for Fairfax County, Virginia.

## Authorized Signatures:

\_\_\_\_\_  
Mother's signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Father's signature

\_\_\_\_\_  
Date

OR

\_\_\_\_\_  
Legal Guardian's signature

\_\_\_\_\_  
Date