

Mail or Pay Online at: <http://www.sgvmusictheatre.org/workshops.html>

Last day of enrollment January 21, 2020

SGVMT's *BROADWAY LOCKER Performer Enrollment Form*

MUSICAL THEATRE PERFORMANCE PROGRAM- South Pasadena Middle School
Spring 2020 Musical OKLAHOMA! Program runs: January 28th – April 19th

Open only to currently enrolled students of South Pasadena Middle School

**Program is Tuesday, Wednesday, Thursday 3pm-5:30pm with some Saturdays and additional dates /times TBD.
There will not be any Program Rehearsals during Spring break**

This form must be completed by a Parent or Legal Guardian.

I acknowledge my Student is currently enrolled at South Pasadena Middle School.

Initial: _____

Media and Participation Release and Authorization: BY SUBMITTING THIS FORM YOU AGREE: PARENT/STUDENT consent to have student participate in The Broadway Locker Musical Theatre Performance Program at South Pasadena Middle School and agree to hold the San Gabriel Valley Music Theatre, Inc., its agents, contractors, or employees harmless from any act of ordinary negligence, arising from any accident, injury, or damage whatsoever, however caused, to any person or persons, or the property of any person or persons, or corporations occurring during all times the student is participating in the program up to and including the time when the student is released into the responsible party's care. San Gabriel Valley Music Theatre, Inc. reserves the right to withdraw any student from the program without refund due to misbehavior. Lastly, San Gabriel Valley Music Theatre, Inc. reserves the right to use photographs, video audio of the student taken during program hours for use in marketing collateral and promotion of San Gabriel Valley Music Theatre. *I understand that these may be used in print publications, online publications, presentations, websites, and social media. I also understand that no royalty, fee or other compensation shall become payable to me by reason of such use.*

Initial: _____

Emergency Medical Authorization:

I am the parent/guardian of the above student. In the case that I am unable to be located during an emergency, I authorize a representative of San Gabriel Valley Music Theatre to act as an agent to consent to give medical or surgical care to the student listed on this enrollment form.

Yes___ or No___ Initial: _____

Participant First Name:	Last Name:	Grade:
Parent/Guardian:	Phone:	Emergency Phone:
Street:	City:	Zip:
Email:	Signature (Parent/Guardian):	*Total \$ Paid:

FEES. Please select one: \$300 + 8 hrs of volunteer service or \$300 + volunteer hour buyout \$100 = \$400.00

Parents or Guardians are required to assist with 8 hours of volunteer service or you may skip the volunteer service hours by selecting the buyout option for a \$100 charitable contribution. The \$100 is tax deductible.. SGVMT is a non-profit organization, tax id #20-2084728. *No refunds will be issued after January 28, 2020.

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

Make Check Payable to: San Gabriel Valley Music Theatre **Mail with enrollment form to:** PO Box 848, San Gabriel, CA 91778

To pay via credit card, please call 626.399.3876 or Pay online at www.sgvmusictheatre.org Go to the "Workshops" tab
Print and email enrollment form to: spms@broadwaylocker.com For assistance, email or 626.399.3876