Sharing the Arts Club at Ridgewood High School presents

Sharing the Arts Club Spring 2023 Musical Theater Workshop

Monday's 3:30 – 4:30 pm April 22, April 29, May 6, May 13

At Ridgewood High School, Front Lawn, or dance studio

Please complete and mail the registration to: Sharing the Arts, P.O. Box 43, Ridgewood, NJ 07451-0043 Any questions please contact Karen at info@sharingthearts.com

Registration:

Name of Student______ Age_____ Grade____

	Name of Parent(s)/Guardian(s)	
	Home Address	
	Home Phone	Cell Phone
	E-mail Address	
in its per and its instruct if I am r the Arts may be session	may be heightened due to the special needs of my chile reforming arts program, I hereby release, waive, and officers, agents, employees, representatives, and suction and dance on the premises, whether or not such not present in the event of an injury to my child, and is to seek medical assistance as they deem appropriat reached during the time my child is on the premises my child is attending. I understand and acknowledge assume and accept all risks. I represent to Sharing the	rolve the risk of physical injury, and that any risk of physical ild, and in consideration for Sharing the Arts accepting my child forever discharge all rights and claims against Sharing the Arts accessors arising out of any injury sustained by my child during injury results from the negligence of Sharing the Arts. Further if Sharing the Arts is unable to contact me, I authorize Sharing te. I will provide Sharing the Arts with a phone number where a that my child is voluntarily participating in this activity, and I we Arts that my child is physically and medically fit to participating the Arts that my child is physically and medically fit to participating the Arts that my child is physically and medically fit to participating the Arts that my child is physically and medically fit to participating the Arts that my child is physically and medically fit to participating the Arts that my child is physically and medically fit to participating the Arts that my child is physically and medically fit to participating the Arts that my child is physically and medically fit to participating the Arts that my child is physically and medically fit to participating the Arts that my child is physically and medically fit to participating the Arts that my child is physically and medically fit to participating the Arts that my child the Arts that my child is physically and medically fit to participating the Arts that my child the Arts that my c
	Parent/Guardian Signature/Date	
	I give permission for my child to be photographed/videoed during class, which may be published in magazine/newspaper articles or advertisements, brochures, newsletters and other marketing materials.	
	Parent/guardian Signature/Date	

Sharing the Arts mission is to enhance the lives of individuals with special needs through the performing arts. www.sharingthearts.org