



Student Application 2018 Audition Prep Series

Student Name: (first) _____ (last) _____

Age: _____ Grade: _____ School: _____

Home Address: _____
Street Apt # City State Zip

Parent Name: _____ Phone: _____

Parent Email (Required): _____

Emergency Contact Name: _____ Phone: _____

Allergies/Medical concerns? _____

Have you taken a class with us before?(Y/N) _____ How did you hear about us? _____

High School

- Audition Prep Course (10/18-11/15) \$200
- Audition Prep Intensive (Nov. 4th) \$150
- Audition Prep Intensive (Nov. 18th) \$150
- Audition Prep Intensive (Dec. 9th) \$150
- Mock Audition (Jan. 4th) \$40
- Mock Audition (Jan. 5th) \$40

Middle School

- Audition Prep Course (10/18-11/15) \$200
- Audition Prep Intensive (Nov. 4th) \$150
- Audition Prep Intensive (Nov. 18th) \$150
- Audition Prep Intensive (Dec. 9th) \$150
- Mock Audition (Jan. 4th) \$40
- Mock Audition (Jan. 5th) \$40

Waiver of Liability and Photo Release: I consent to my child's participation in The Academy and its associated classes. In an emergency I can be reached at the number listed above. On the event that I or my emergency contact cannot be reached, I authorize Educational Gallery Group to authorize or refuse necessary emergency treatment for my child.

I further agree to indemnify, protect, and hold harmless the Educational Gallery Group, its instructors, and all other persons that supervise the children participating in the Academy from any claim or liability whatsoever, including, but not limited to personal injury, property damage, court costs, attorney's fees and interest, however caused. Through signing this form, I release the Educational Gallery Group, and its staff from any negligence incurred.

I also understand that the Educational Gallery Group will not tolerate students with disruptive behavior. We reserve the right to terminate the participation of a student in the program for failure to behave or have conduct that is detrimental to or incompatible with the interest, harmony, comfort or welfare of the other students. If the participation is terminated, no processing/ supply fees will be refunded.

Furthermore, Educational Gallery Group has my permission to use my or my child's photograph publically to promote Eg2. I understand that the images 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. By signing this waiver below, I agree that all information is correct and I give my consent to all of the above.

Date: _____

Signature of Parent/Gaurdian: _____