

**Hale Centre Theatre Classes Registration Form – Fall Winter Spring Youth**

**Student's Name** \_\_\_\_\_ **Age** \_\_\_\_\_

**T-shirt size (circle one) Child S M L Adult S M L no shirt**

**Parents' Names** \_\_\_\_\_

**Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**E-mail address** \_\_\_\_\_

**Day/Evening Phones** \_\_\_\_\_

**Emergency Contact (if parents aren't available) :**

**Persons authorized to pick up your student(s) :**

**Any special needs we need to be aware of :**

**Payment:** \_\_\_\_\_ **check enclosed**

**Credit Card #** \_\_\_\_\_ **Exp. Date** \_\_\_\_\_

**Authorized Signature** \_\_\_\_\_

**Policies**

**Please be prompt in dropping off and picking up your student(s). Hale Centre Theatre does not assume responsibility for any child dropped off unattended. Please do not drop off your child(ren) more than 10 minutes before the class begins. Please contact us at 984-9000 to alert us if you will be delayed in picking up your child due to an emergency, such as car trouble.**

**If fewer than the minimum number enroll, the class will be canceled. You will be notified and will receive a refund. Refund requests and withdrawal from classes must be made by parents. NO REFUNDS WILL BE AUTHORIZED AFTER THE FIRST WEEK OF CLASSES. No refunds will be authorized in the event of a dismissal.**

**I have read and will abide by the above policies. I am aware of the nature and content of the program and assume the risks associated with my child's participation. I agree not to allege or attempt to impose any liability on HCT in the event of any damage, injury or loss resulting from such participation.**

\_\_\_\_\_  
**Signature (Parent/Guardian)** **Date**