



# Scripps Theatre Arts

## Spring 2020 Production Registration Form

Participant (Child's) Name \_\_\_\_\_

Grade: \_\_\_\_\_ Age: \_\_\_\_\_ DOB: \_\_\_\_\_ Male / Female

Legal Guardian/Parent name (please print) \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email address \_\_\_\_\_

Notify in Case of Emergency:

1. Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

2. Name \_\_\_\_\_ Relationship \_\_\_\_\_ Phone \_\_\_\_\_

- By signing below you acknowledge that the registration fee is due at audition and is non-refundable.
- Your signature authorizes Scripps Theatre Arts to use your child's name and any photographic and/or videotaped images of your child for making and publicity purposes without any further authorization from the parent/guardian and without financial or other compensation.
- By signing below you agree to indemnify The City of San Diego, Hourglass Miramar Recreation Center, The Scripps Ranch Recreation Center, The Scripps Ranch Library, Poway Center for the Performing Arts, Scripps Theatre Arts, and all of their officers, agents, employees, subcontractors and independent contractors and hold them free and harmless for any property damage, bodily injury or death or any other element of damage of any kind occurring anytime you or your child is engaged in an activity by, or on behalf of, or related to Scripps Theatre Arts.

Legal Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Payment can be made via Venmo to @scrippstheatrearts, check to Scripps Theatre Arts, or on the website at [www.scrippstheatrearts.com](http://www.scrippstheatrearts.com). Production fee is \$275 per participant, subsequent siblings receive a \$25 discount.

Please charge my MasterCard or Visa # (via Paypal) \_\_\_\_\_

In the amount of \$ \_\_\_\_\_ Billing Zip Code # \_\_\_\_\_ CVV: \_\_\_\_\_ Exp Date: \_\_\_\_\_

Name on card: \_\_\_\_\_

I understand that payments made via Paypal will be charged a 3% convenience fee on top of the amount noted above.

Signature: \_\_\_\_\_

### FOR STAFF USE ONLY

Date	Amt. Paid	Cash/Check Number	Staff Initials
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