

## 2023 Summer Camp Intensive Registration and Health Forms

## PERFORMER INFORMATION

Child's First Name:	irst Name: Child's Last Name:		
Child's Age:	Grade for 2023/2024 Year:		Male or Female (circle one)
Child's School:			
Child's Home Address:			
Child's Email:			
Child's Phone Number:			
Child's Special Circumsta	nces or Medical Needs/Allerg	ies/Information:	
PARENT/GUARDIAN INFO	ORMATION		
Parent/Guardian 1 First Name:		_ Parent/Guardian 1 First Name:	
Parent/Guardian 1 Phone	e Number:		
Parent/Guardian 1 Email:			
Parent/Guardian 1 Home	Address:		
Parent/Guardian 2 First Name:		_ Parent/Guardian 2	First Name:
Parent/Guardian 2 Phone	e Number:		
Parent/Guardian 2 Email:			
Parent/Guardian 2 Home	Address:		

## HEALTH INFORMATION AND GENERAL RELEASE

Known allorgies or other modical conditions that Directors (Staff / Jolynteers at Artstarts should be aware)

Known anergies of other medical conditions th	at Directors/Starly volunteers at Artstarts should be aware.
In case of medical emergency, the following po	eople should be contacted:
Name:	Phone:
Relation to Child:	
Name:	Phone:
Relation to Child:	

This undersigned enters this agreement with Artstarts Company.

I have been informed and understand that Artstarts Company may photograph or record participants during the practice and or production of this camp/show/production/event. I grant Artstarts Company the right to use my likeness, image, voice, appearance, and performance or my child's name, likeness, image, voice, appearance, and performance hereinafter referred to as the "Product", and the right to broadcast, exhibit, market, sell, display, and to post the Product to Artstarts Company's website, Facebook, and other social media outlets, and otherwise distribute the Product from the camp/show/production/event.

The participant, or if the participant is a minor, the participant's parent or legal guardian agrees to hold Artstarts Company harmless from any liability for loss or injury which may occur during the camp/show/production/event. Should the participant cause property damage, the participant or the participant's parent or legal guardian agrees to indemnify Artstarts Company for any damage caused by the participant.

I confirm that I have a right to enter this agreement on behalf of the child whose name is indicated below, that I am not restricted by any commitment to third parties, and that Producer has no financial commitment or obligation to me as a result of this agreement.

I have read the foregoing and understand and agree to its terms.

Participant's Name:

Parent or Guardian's Name (Please Print):

Parent or Guardian's Signature:\_\_\_\_\_ Date:\_\_\_\_\_ Date:\_\_\_\_\_ Date:\_\_\_\_\_