

Youth Arts Program Required Form

This form must be signed and accompany the registration form for each child who is applying. Their registration cannot be processed without this form.

Medical/Liability Information

Full Name of Child (please print):

Date of Birth: ____/ ___ Grade entering _____ Gender: M / F

In order for our staff to best serve your child please share information with us regarding any current physical or mental health issues. Please list health conditions or limitations (allergies, headaches, heart, respiratory, sinus, behavioral, back, recent injuries):

Does your child have any food allergies (if so to what):

Current Medication(s) (if any):

Person to be notified if above cannot be reached:

Name: ______ Relationship: _____

Home Phone _____ - ____ - ____ Other Phone: _____ - ____ - _____

Liability Clause

I agree that I will not hold the Bates Dance Festival, Bates College or any YAP instructors or staff liable for any injuries sustained, illnesses contracted, or loss of property incurred while my child/ren is a participant of the Youth Arts Program. I, ______, do hereby confirm that the above information is complete. (Parent/Guardian Name - please print)

Publication Release

I hereby grant to Bates Dance Festival (Bates College):

1. the right to take, reproduce, use, exhibit, display, publish, broadcast, distribute and create photographs and/or photographic, film or videotaped images of the student named below in connection with the activities of the Festival and College for promoting, publicizing, or explaining the Festival or its activities. This release includes, without limitation, the right to publish such images in Festival marketing brochures, on the Festival's website, and in public relations, promotional, and advertising materials. These images of the student may appear in any of a wide variety of formats and media available to the Festival now or in the future, including but not limited to print, broadcast, videotape, digital, CD-ROM and/or electronic/online or internet media.

Contract for Participation

Please read this contract together with your child. Please check each box to show that you understand and agree to abide by our policies.

STUDENT: As a participant in the Youth Arts Program, I understand that I am expected to:

Respect the program, my classmates, teachers, Bates College, and building rules Attend all classes

Arrive on time every day

Strive to participate fully and do my best at all times

Dress appropriately for activities (clothes that allow full movement and cover for modesty) Leave all valuables & electronic equipment at home (including jewelry, radios, CD players, video games, I- pods, etc.)

Turn off all cell phones during activities

I understand that if I break this pledge my parents/guardians will be contacted and I could be dismissed from the program

I, as a participant in Bates Dance Festival's Youth Arts Program, pledge to honor these rules to the best of my ability.

PARENT/GUARDIAN: As the parent of a child enrolled in the Youth Arts Program, I understand and will assist my child in honoring these rules:

I am responsible for getting my child to and from all classes at the appropriate time.

I understand that I must contact the office directly (786-6381) if my child will be late or unable to attend, or if someone else will be transporting them to and from the program.

I understand that YAP reserves the right to dismiss a student whose actions are not in keeping with the YAP policies including disrespect for other people or property.

I understand that it is my own responsibility to cover my child with medical insurance.

Signature of Student (if over 12 years)

Signature of Parent or Legal Guardian_____

Date_____