



CORTLAND REPERTORY THEATRE

YOUTH PROGRAM

iLuminate Registration Form

April 25-29, 2016 10am-5pm

Name: _____ Age: _____

School District: _____

Email address: _____

Please circle one: PERFORMER TECHNICIAN

If Performer, please circle training level: BEGINNER INTERMEDIATE ADVANCED

Emergency Contact: : Name _____ Phone: _____

Total cost for the program: \$100 per student . Lunch will not be provided (lunch break from 1-2pm).

Cash: _____

Check: _____

OR

Charge my credit card (circle one): MC VISA Discover

Card# _____

Expiration Date _____ CID # _____

Signature: _____

Release: The undersigned on behalf of him/herself and on behalf of his/her child

releases Cortland Repertory Theatre and its employees, and other volunteers, from any liability for bodily injury, property damage/loss, or otherwise, arising out of or resulting from said child's participation in the program, whether caused by negligence or otherwise, regardless of how such injury may arise.

Parent/Guardian Signature

Date: