

# FALL 2018 REGISTRATION

Complete information below (separate form for each registrant) and return with payment to:  
 Fantasy Playhouse Children's Theater & Academy, 3312 Long Ave., Huntsville, AL 35805 or Fax to 256-539-6835

## STUDENT INFORMATION

Full Name \_\_\_\_\_  Male  Female

Age \_\_\_\_\_ DOB \_\_\_\_\_ New Student to FPCT?  Y  N

School Currently Attending \_\_\_\_\_ Grade \_\_\_\_\_

So that we may better serve you, please inform us of any allergies and/or physical, developmental or cognitive disabilities: \_\_\_\_\_

How did you hear about Fantasy Playhouse: \_\_\_\_\_

Each student receives a FREE t-shirt (check one): Youth:  S  M  L  XL Adult:  S  M  L  XL

## PARENT/GUARDIAN INFORMATION

Name \_\_\_\_\_ Relationship \_\_\_\_\_

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

Home Phone \_\_\_\_\_ Cell \_\_\_\_\_

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

*\*Important! required for confirmation purposes!*

List person(s) responsible for after class pick-up

Name \_\_\_\_\_ Cell \_\_\_\_\_

Name \_\_\_\_\_ Cell \_\_\_\_\_

Does anyone in your household have military affiliation? Please check all that apply:

Active Duty  Reserve  Civil Servant  Government Contractor

## CLASSES / TUITION

Class 1 \_\_\_\_\_

Class Day \_\_\_\_\_ Class Tuition \$ \_\_\_\_\_

Class 2 \_\_\_\_\_

Class Day \_\_\_\_\_ Class Tuition \$ \_\_\_\_\_

Class 3 \_\_\_\_\_

Class Day \_\_\_\_\_ Class Tuition \$ \_\_\_\_\_

**Discounts** \$ \_\_\_\_\_

**Total Tuition** \$ \_\_\_\_\_

## PAYMENT

Check enclosed (make payable to "FPCT")

Credit Card:  Visa  MC  Discover  Amex

Name on Card \_\_\_\_\_

Account # \_\_\_\_\_

Exp. Date \_\_\_\_\_ CVV \_\_\_\_\_

Zip \_\_\_\_\_

Cardholder Signature \_\_\_\_\_

*\*Early Bird Discount applies to registrations received by July 13, 2018 \*FPCT Season Subscriber Discount (\$5 off per child)*

## RELEASE AGREEMENT

Although every effort is made to provide a safe environment, Parent/Guardian should recognize that there is always a risk of accident. Parent/Guardian agrees to be responsible for any medical bills incurred resulting from illness or injury during child's participation in Fantasy Playhouse Children's Theater & Academy programs. Families are expected to carry their own accident and medical insurance and agree to hold harmless Fantasy Playhouse Children's Theater & Academy from any and all liability and/or claims or damages arising out of personal injury of any kind. If necessary, Parent/Guardian authorizes Fantasy Playhouse Children's Theater to administer first aid and/or authorize medical treatment for program participant.

*I have read and understand all program information, and hereby grant permission for the child named above to participate in the Fantasy Playhouse Children's Theater & Academy programs.*

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_