

ARTS Summer Classes

Registration Form 2019

Participant Name: _____ Parent/Guardian Name: _____

Participant Info: Male Female Birthdate: _____ Age: _____ Grade: _____

Address: _____ City: _____ Zip Code: _____

Day Phone: _____ Evening Phone: _____ Email: _____

Visa MasterCard Discover American Express Card #: _____

Expiration Date: _____ CVV #: _____ Signature: _____

Outstanding balances due to the Decatur Park District must be paid in full before enrollment and/or participation in other Park District activities.

Dance Classes (June 11-July 11)

- _____ 472501-05 Toddler Movement: Mom & Tot,
(18 Months-3 years) T 5 – 5:30 pm
- _____ 472501-06 Intro to Dance (3-5)
Th 5:15 – 5:45 pm
- _____ 472505-11 Tap (6 – 9) Th 6:30 – 7:15 pm
- _____ 472505-12 Tap (10-16) T 6:30 – 7:15 pm
- _____ 472505-13 Adult Tap Technique (16 +)
T 4:30 - 5:30 pm
- _____ 472506-02 Ballet Tech (10+) T 5:30 – 6:30 pm
- _____ 472518-12 Ballet Jazz Dance Combo (6 – 9)
Th 5:30 – 6:30 pm
- _____ 472516-52 Lyrical (10+) Th 4:30 – 5:30 pm
- _____ 472517-02 Hip Hop (5-9) Th 4:30 – 5:15 pm
- _____ 472517-03 Hip Hop (9-14) Th 5:45 – 6:30 pm

Preschool Drama Classes

- _____ 492102-10 Super Why Heroes (3-6)
June 11, T 5:45 – 6:15 pm
- _____ 492102-11 Paw Patrol Rescue (3-6)
June 18, T 5:45 – 6:15 pm
- _____ 492102-03 Octonaut Adventure (3-6)
June 26, T 5:45 – 6:15 pm
- _____ 492102-04 Daniel Tigers Neighborhood (3-6)
July 2, T 5:45 – 6:15 pm
- _____ 492102-05 PJ Masks (3-6)

July 9, T 5:45 – 6:15 pm

Drama Classes (June 11-July 9)

- _____ 472528-02 Comedy of Errors (6-12)
T 6:15 – 7:15 pm

Best Of Summer Stock (June 17-July 21)

- _____ 632234-19 BOSS Jr.- *Aladdin Kids*
(6 -11) 9 am - noon
- _____ 632234-18 BOSS Sr. - *Mary Poppins Jr.*
(11-18) 1 – 4 pm

Greater Decatur Youth Band (June 10-August 1)

- _____ 632931-21 Jump Start, 0-1 year
experience, M/W 9:00 – 9:45 am
- _____ 632931-20 Crescendo Band, 2-3 years'
experience, M/W 10:00 – 11:00 am
- _____ 632931-19 Forte Band, 3+ years
experience, M/W 11:15 am –12:30 pm

Summer Strings (June 10-July 24)

- _____ 623031-46 Pizzicato Orchestra (7 – 18)
1-2 years' experience, 10:00 – 11:00 am
- _____ 623031-47 Arco Orchestra (7 – 18) at least
3 years' experience, 11:15 am – 12:30 pm

Decatur Park District Waiver- Please Sign Below

In accordance with the Americans with Disabilities Act, does registrant require any special accommodations or assistance for enjoyment of the program? Yes [] No [] If yes, please describe: _____

WAIVER AND RELEASE OF ALL CLAIMS AND ASSUMPTIONS RISK

Please read this form carefully and be aware that in signing up and participating in this program(s), you will be expressly assuming the risk and legal liability and waiving and releasing all claims for injuries, damages, or loss which you or your minor child/ward might sustain as a result of participating in any and all activities connected with and associated with this program(s) (including transportation services and vehicle operations, when provided).

I recognize and acknowledge that there are certain risks of physical injury to participants in this program(s), and I voluntarily agree to assume the full risk of any and all injuries, damages or loss, regardless of severity, that my minor child/ward or I may sustain as a result of said participation. I further agree to waive and relinquish all claims I or my minor child/ward may have (or accrue to me or my child/ward) as a result of participating in this program(s) against the Decatur Park District, including its officials, agents, volunteers and employees (hereinafter collectively referred as "Decatur Park District"). PHOTO: I understand that my child/ward or I may be photographed or videotaped while participating in a Decatur Park District program. I give permission for photos and videotapes of my child/ward to be used to promote the Park District. Such photos and videotapes will remain the property of the Decatur Park District. I do hereby fully release and forever discharge the Decatur Park District from any and all claims for injuries, damages, or loss that my minor child/ward or I may have or which may accrue to me or my minor child/ward and arising out of, connected with, or in any way associated with this program/activity. I have read and fully understand the above waiver and release of all claims and assumption of risk. If registering online or via fax, my online or facsimile signature shall substitute for and have the same legal effect as an original form signature.

Signature (18 years or older or Parent/Guardian): _____ Date: _____

NOTE: The Decatur Park District does not carry medical or accident insurance for its participants. The cost of such insurance would make program costs prohibitive. We suggest that you look at your own insurance policy to be sure you are adequately covered. The Park District assumes no responsibility for personal injuries or loss of personal property.