

**YORKTOWN STAGE
ACADEMY
REGISTRATION FORM**

*Scan or picture this registration and return:
by email to barryysproducer@gmail.com*

Child's Name: _____
Last *First*

Date of Birth: _____ **Age Today:** _____ **Next Fall Grade:** _____ **Boy / Girl (Circle)**

Name of Primary Parent/Guardian: _____ **Email Address** _____
REQUIRED: Confirmation of Registration will be sent by EMAIL ONLY

Address of Primary Parent/Guardian: _____
Number & Street *Town* *State & Zip*

Phone Nos. Primary Parent/Guardian: Home _____ Business _____ Cell _____
(Please Be Sure To Add Area Code)

Name of Other Parent/Guardian: _____ **Email Address** _____

Phone Nos. Other Parent/Guardian: Home _____ Business _____ Cell _____
Area Code/Number *Area Code/Number* *Area Code/Number*

CONFIRMATION: I have read and understand the details, requirements and restrictions of the program on the website or through a Yorktown Stage email campaign. I understand that I will receive a confirmation after submitting this registration, which will repeat the details, requirements and restrictions of the program.

RELEASE STATEMENT: I hereby release the Executive Director and all employees of YORKTOWN STAGE and ACADEMY from all claims of liability for any damages or injuries which may be sustained while my child is in ACADEMY. I hereby give permission for my child's photograph to be used in Yorktown Stage's Academy publications, and for advertising and promotions. I hereby authorize YORKTOWN STAGE to charge my credit card below referenced for all monthly charges and any and all charges incurred by me. Expired or invalid credit card information will be supplied immediately.

REFUND POLICY: There will be no refunds and no credits for any person for any reason after October 1. The Camp Director and/or the Executive Director have the right to dismiss any child for behavioral problems. Money will not be refunded for days missed due to dismissal or illness.

Signature of Parent / Guardian _____ **Date:** _____

<p><i>IF PAYING BY CHECK (only for full amount of program)</i></p> <p>AMOUNT ENCLOSED \$ _____</p> <p>Check # _____</p> <p>Bank Name _____</p> <p>Bank City _____</p>	<p style="text-align: right;"><i>IF PAYING BY CREDIT CARD:</i></p> <p>AMOUNT TO BE CHARGED \$ _____</p> <p>Credit Card # _____</p> <p>Expiration Date _____</p> <p>Security Code _____</p>
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