



# Treasure Coast Community Singers Youth Chorus Registration Form

Student's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_

Address: \_\_\_\_\_ Shirt Size: \_\_\_\_\_

City: \_\_\_\_\_ Zip: \_\_\_\_\_ School: \_\_\_\_\_

Parent's Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Singer's Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

**In case of an emergency, whom should we contact?**

Name: \_\_\_\_\_ Relationship \_\_\_\_\_ Phone Number: \_\_\_\_\_

Please list any medical conditions/allergies \_\_\_\_\_

**Rehearsals:** Thursdays, 4:30-5:30 at Covenant Fellowship Church, 2880 SE Aster Lane Stuart, FL 34994

First Rehearsal: Thursday, September 10. Concert scheduled December 5, 2020

**Registrations Fee:** \$100 per concert session - Additional family members \$50 each.

**Payment Method:** [ ] Check [ ] Credit Card [ ] PayPal **Registration fees are non-refundable**

**Release for Communication and Media Print Including Website** This is a release to use pictures and testimonies in any media print and/or website. The undersigned individual hereby agrees to provide the Treasure Coast Community Singers (TCCS) the right to use the following in all forms of media and in all manners, including composite or distorted representations for advertising or any other lawful purposes. I waive any right to inspect or approve the finished version(s) including written copy that may be created in connection therewith.

Pictures at TCCS concerts  
TCCS website

Social Media  
Newspaper

Video  
Publicity materials for TCCS

I have read this release and am fully familiar with its contents.

Student's name: \_\_\_\_\_ Date: \_\_\_\_\_  
(Print)

I am the parent or guardian of the minor named above and have the legal authority to execute the above release. I approve the foregoing and waive any rights.

\_\_\_\_\_  
Signature Date: \_\_\_\_\_

\_\_\_\_\_  
Printed name