



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, January 14, 2021. Concert scheduled May 16, 2021

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

Payment Method: [] Check [] PayPal **Registration fees are non-refundable or [] cash in person**

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.

_____ Date: _____

Signature

Printed name