



REGISTRATION FORM

STUDENT NAME:

INSTRUMENT:

(GUITAR, BASS, DRUMS, VOCALS, OTHER)

SELECT YOUR CAMPS

CAMP TITLE	DATES	TIME	TUITION
TOTAL PAYMENT ENCLOSED:			

PAYMENT METHOD

CHECK (MADE PAYABLE TO DAVID'S GUITAR LOFT)

CREDIT CARD:(CIRCLE ONE) VISA MASTERCARD DISCOVER AMERICAN EXPRESS

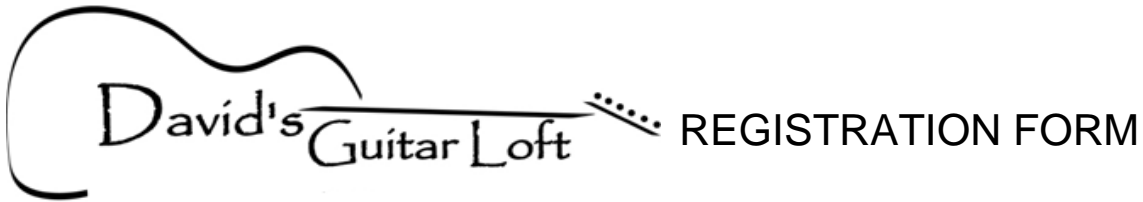
CREDIT CARD NUMBER:

EXP. DATE:

VERIFICATION #

NAME AS IT APPEARS ON CARD

SIGNATURE



STUDENT'S NAME

GRADE ENTERING IN 2010-2011 SCHOOL YEAR (CIRCLE ONE) Pre-K K 1 2 3 4 5 6 7 8 9 10 11 12

SCHOOL

STUDENT'S BIRTH DATE

ALLERGIES (ANY TYPE)

MEDICATIONS (MEDICATIONS WILL NOT BE GIVEN WITHOUT WRITTEN INSTRUCTIONS FROM CHILD'S PHYSICIAN.)

MENTAL OR PHYSICAL CONDITIONS (PLEASE LIST ALL)

PRIMARY PHYSICIAN

PHYSICIAN PHONE

HOSPITAL OF CHOICE

IF YOU OR THE PHYSICIAN OF YOUR CHOICE CANNOT BE REACHED, DO YOU AUTHORIZE OUR STAFF TO ACCOMPANY YOUR CHILD TO THE NEAREST HOSPITAL? (CIRCLE ONE) YES NO

PARENT/ GUARDIAN'S NAME

ADDRESS

CITY

STATE

ZIP

PHONE # DURING CAMP HOURS

E-MAIL

EMERGENCY CONTACT NAME

CONTACT'S RELATIONSHIP TO CHILD

PHONE # DURING CAMP HOURS

IN THE EVENT THAT I CANNOT DROP OFF OR PICK UP MY CHILD FOR CAMP, I AUTHORIZE THE FOLLOWING PERSON(S) TO DO SO:

NAME

RELATIONSHIP

NAME

RELATIONSHIP

SIGNATURE OF PARENT/ GUARDIAN

DATE



REGISTRATION FORM

Photo Release Form (optional)

I give my permission for David's Guitar Loft to use photographs of my child _____ for purposes of publicity or publications, both internally and externally through various media sources, including but not limited to, newspaper, magazine, internet and television.

Liability Release Form (required)

Release is made as of (date) _____ by the undersigned. I understand and appreciate that participation in the David's Guitar Loft Summer Camp Program involves potential, although highly unlikely, loss or damage to personal property and bodily injury.

In consideration of my being permitted, or my child being permitted, to participate in the scheduled activity, I hereby release and hold harmless David's Guitar Loft as sponsor, its owners, employees and agents (the "Released Parties") from any and all actions, damages, claims or demands which I or my child(ren), our heirs, executors, administrators or assigns may have against the Released Parties for all bodily injuries, known misconduct or grossly negligent act, of any of the Released Parties.

I, the undersigned, have read this release and understand its terms. I realize this is a partial release of liability, and limits, to some extent, my rights to sue in the event of any loss or injury, and I execute it voluntarily and with the full knowledge of its significance. I agree to follow, or cause to be followed, all directions of the activity's leaders.

I understand that cell phones are not allowed at camp, and my child(ren) will not bring a phone to camp. If phones are brought to camp they will be confiscated and held at the retail desk until Student is picked up at the end of the day. If multiple offenses occur it may warrant permanent expulsion from camp and forfeiture of all fees.

I, the undersigned, am the parent or legal guardian of the following named minor _____ and enter into the foregoing release on the minor's behalf.

SIGNATURE OF PARENT/ GUARDIAN

DATE

FOR OFFICE USE ONLY

Payment type and amount

Date Rec'd

Rec's by

Confirmation No.

Your feedback is important to us.

Please tell us where you heard about David's Guitar Loft Summer Camp Programs

_____ We have previously attended David's Guitar Loft workshops

_____ We are currently or have been in the past students at David's Guitar Loft

_____ While visiting David's Guitar Loft retail store/ lesson studio

_____ From a friend, David's Guitar Loft Staff Member, or word of mouth

_____ Advertisement in a print publication: **Which one?**

_____ Promotional Mailing

_____ Other (please explain)

