



**Student Registration Form
Arts Education Program (Fall, Spring or Summer)**

Student Name _____

Address _____

City _____ **State** _____ **Zip** _____

Home Phone () _____

Student Gender: Female Male **Student Birthdate:** ____/____/____

Student Cell Phone () _____

Student Email _____

School _____ **Current Grade** _____

Emergency Contact/Parent or Guardian _____

Emergency Contact Phone () _____

Emergency Contact Email _____

Relationship to student _____

Disabilities:

Allergies (include all):

Medications:

Participation

I am the parent or guardian of the child named above, and hereby request that my child be permitted to participate in Karamu House, Inc.'s ("Karamu" or "Karamu's") Arts Education Program (Fall, Spring, or Summer). All Karamu actions requirements, directions, and standards shall be deemed to have been intended for the benefit of my child. My child is aware of the risks involved with participating in Karamu's Arts Education Program. I warrant and represent that no physical or other reason would restrict or preclude my child's participation.

Liability waiver

I understand enrolling myself or my child as a student of Karamu House, Inc. means I agree to release and hold harmless Karamu House, Inc., including its teachers, dancers, staff members and facilities used by the company, from any cause of action, claims, or demands now and in the future. I will not hold Karamu or its teachers, dancers and staff liable for any personal injury or any personal property damage which may occur while I am present for class.

Financial agreement

I understand by enrolling myself or my child as a student of Karamu House, Inc., I am obligated to pay all tuition and charges required for the entire semester. I understand that the first installment tuition payment is required to hold my space in class and that all further tuition payments are due based on the dates of my payment plan. The amount due will be based on the number of classes taken per week, for the entire semester. I understand that no refunds will be given.

Medical Release

On behalf of my child and myself, I understand that classes involving physical activity, such as dance, drama and vocal music present a risk of physical injury or illness, and acknowledge and agree that neither Karamu House, Inc., nor its instructors or staff shall bear any responsibility, or have any liability, for any personal injury or illness that may result from participation in classes or any of its related functions. I authorize Karamu’s instructors or staff to obtain such medical care, emergency or otherwise, that it or they may deem necessary for my child. Further, I warrant and represent that I have adequate health insurance or personal funds to provide payment for all costs of such medical care, which shall be my responsibility.

Media Release

I grant irrevocable permission to Karamu to use my child’s name, photograph, video, likeness, voice, statements, or biographical material (collectively “Material”) associated with the Arts Education Programming in any and all manner and media throughout the world, in perpetuity. I irrevocably assign all worldwide copyrights in the Material to Karamu. I waive any rights of inspection or approval. I agree that the Material may be edited, adapted, expanded, revised or modified at the sole discretion of Karamu and its affiliates. I consent to use of the Materials in connection with publicity, advertising, promotion, publication, and any other purposes. I understand that Karamu may use the Materials in any media or format it chooses, whether or not for profit, including without limitation television, radio, print, promotional materials, and Internet.

Dismissal

I acknowledge and agree that Karamu may dismiss my child either temporarily or permanently, in the event of behavior that is disruptive, dangerous, uncooperative, or otherwise unacceptable in the sole judgement of Karamu; and in such event, Karamu will owe no refund or other compensation whatsoever.

I agree to release and discharge Karamu and its affiliates from all claims, liabilities, losses, and costs (including without limitation, attorneys’ fees and other costs of defense) that I (or my child) may now or hereafter have against any of them arising out of or relating to participation in the Event(s) or Karamu’s rights granted by this agreement, including without limitation claims for compensation, defamation, infringement, and invasions of privacy. This agreement impacts my legal rights and duties, and those of my child. I have read this document and fully understand it. Agreed and accepted:

_____ Signature _____ Date
Parent/ Guardian (Print)

Class Selection(s) _____
Tuition Total _____

Method of Payment: Visa MC Amex Cash
Account Number _____
Name on Card _____
Expiration ___/___ CVV _____
Amount Paid _____



Emergency Pickup Information

In the event of an extreme emergency (in which the parent/guardian are unavailable) you may designate another party to pick up your child. Any authorized persons must have proper identification - State I.D. or Driver's License. You **MUST** name at least one.

_____ (*student's name*) may be picked up from Karamu House Programming by the following person(s):

Parent who should be contacted FIRST: _____ Phone #: _____

Authorized pick-up individuals:

<u>Name</u>	<u>Relationship</u>	<u>Phone #</u>
1. _____		
2. _____		
3. _____		
4. _____		