



Registration Form

Student's Name: _____ Age: _____

Name of Class: _____ Grade: _____

Parents' Names: _____

Mailing Address: _____

1st Phone #: _____ 2nd Phone #: _____

E-mail Address: _____

Payment: Check or Credit Card Amount due: _____

Credit Card #: _____

Verification (three digit # on the back of the card): _____

Expiration Date: _____

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Fill out and mail with payment to:
Town Hall Arts Center
2450 W. Main St. Littleton, CO 80120

Phone: **303-794-2787 x 217**
Or Fax to: **303-794-6580**

To register electronically, e-mail
Robert Michael Sanders, Education Manager:
rsanders@townhallartscenter.org



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Waiver and Release Form

Liability Release and Parental Consent Form

In consideration of the acceptance of my application for the above program, I hereby waive, release, and discharge any and all claims for damages for personal injury, property damages or which may hereafter occur to me as a result of participation in said event. This release is intended to discharge in advance Town Hall Arts Center, its officials, officers, employees, volunteers and agents from liability, even though that liability may arise out of perceived negligence on the part of persons mentioned above. It is understood that some recreational activities involve an element of risk or danger of accidents, and knowing those risks, I hereby assume those risks. It is further understood and agreed that this waiver, release and assumption of risk is to be binding on my heirs and assignees.

Parental Consent (Complete if applicant is under 18)

I give consent for my child _____ to participate in the above activities, and I execute the above liability release on their behalf.

Consent for Treatment

I hereby give my consent to have the above applicant treated by emergency medical personnel, a physician, or surgeon, in case of sudden illness or injury while participating in the above activity. It is understood that Town Hall Arts Center will provide no medical insurance for such treatment, and that the cost thereof will be at my expense.

I have read and understood the foregoing registration liability release and parental consent form, and agree to all of its terms and conditions.

Parent/Guardian Signature

Print Name

Date



TOWN HALL ARTS CENTER
**EDUCATIONAL
PROGRAMS**

Learning for life through arts education.

Waiver and Photo Release Form

Town Hall Arts Center takes children's privacy rights very seriously and wants to protect them at all times.

I _____ hereby authorize Town Hall Arts Center (THAC) may publish the photographs taken of me and/or the undersigned minor children for the THAC website, print, or media for promotional use only. I release Town Hall Arts Center from any expectation of confidentiality for the undersigned minor children and myself and attest that I am the parent or legal guardian of the children listed below and that I have the authority to authorize THAC to use their photographs (no names) and acknowledge that since participation in publications and websites produced by THAC is voluntary, neither the minor children nor I will receive financial compensation. I further agree that participation in any publication and website produced by THAC confers no rights of ownership whatsoever. I release THAC, its contractors and its employees from liability for any claims by me or any third party in connection with my participation or the participation of the undersigned minor children.

I _____ do NOT give permission for my child's image to be used in or on THAC's website, print or other media for promotional purpose.

Signature: _____ Date: _____

Street Address: _____

City, State, Zip: _____

Names and Ages of Minor Children:

Name: _____ Age: _____

Name: _____ Age: _____