



PART I - Child Information

First name : Last name :
Address :
City :
State Zip :
County :
Home Phone : () Cell Phone : ()
Child's date of birth (mm/dd/yyyy) :
Grade in **FALL 2009** :
School in **FALL 2009** : MPS? (Please Circle): Yes No
OPTIONAL - For internal grant reporting use only. Please indicate the student's race/ethnicity:

PART II - Parent/Guardian Information:

FATHER/GUARDIAN:

First name: Last name :
E-mail:
Employer (e.g. company name) :
Job/Title :
Work phone : ()

MOTHER/GUARDIAN:

First name: Last name :
E-mail :
Employer (e.g. company name) :
Job/Title :
Work phone : ()

PART III – Emergency Information

Information of someone other than parent
Emergency Contact Relationship to child :
First name: Last name :
Address :
City :
State : Zip :
Emergency Phone : ()

**If your child has any medical conditions we should be aware of, please disclose them below :

MUST BE SIGNED TO PARTICIPATE

As a condition to my child's participation in the Bel Canto Boy Choir, I hereby release and hold harmless Bel Canto Chorus, Bel Canto Boy Choir, Mequon United Methodist Church, the Broadway Theatre Center and all of their respective owners, employees, agents and representatives, from and against all claims, damages and other liabilities whatsoever, including but not limited to personal injury, illness or property damage, which relate in any way to my child's participation in the Bel Canto Boy Choir.

Signature of parent/guardian : Date :