

THE WHOLE FLUTIST

EVENT REGISTRATION FORM

_____ Middle School Event June 22-25 2015 _____ High School Event July 13-16, 2015

** Tshirt Size ** Sm _____ Med _____ Large _____ XLrg _____

Student Name _____

Age _____ Grade (Fall '15) _____ Years Played _____

School _____

Parent Name(s) _____

Address _____

City _____ Zip Code _____

Parents' Email _____

Student's Email (Opt) _____

Parents' Phone # (during event hours) _____

Payment Information

Event Tuition - \$265 + \$25 Materials Fee (Tshirt included)

Deposit Enclosed \$_____ (min. half of tuition=\$132.50) due by May 1, 2015

Please make checks payable to "KARA SWANSON"

Payment of the Deposit and Registration Form Completion reserves your spot at the Event

Remaining Balance due by June 8, 2015 _____

Liability Release Form

Parents assume full responsibility for personal injury to the student named above. Parent(s) release The Whole Flutist and Kara Swanson from all liability, costs and damages which might arise from participation in The Whole Flutist event.

By signing below, the parent agrees that the minor has their consent to participate in the event. The parent provides consent to Kara Swanson to seek emergency treatment for the minor if necessary. Parents agree to accept financial responsibility for the costs related to this emergency treatment.

Parents agree to be financially responsible for any damage to physical property caused by the student or by actions caused by the student which result in injury to any other person.

Signature of Parent _____ Date _____

Signature of Student _____ Date _____