



# Registration Form

(Cadenza Caprice Cadet) Please enter amount from price list

Singer's first name	Last name	Birthdate	Gender	Choir	Section	Tuition	Polo	Size
		mm/dd/yy	<input type="checkbox"/> M <input type="checkbox"/> F					
		mm/dd/yy	<input type="checkbox"/> M <input type="checkbox"/> F					
		mm/dd/yy	<input type="checkbox"/> M <input type="checkbox"/> F					
		mm/dd/yy	<input type="checkbox"/> M <input type="checkbox"/> F					

Total \_\_\_\_\_

Parent(s) Name \_\_\_\_\_

Grand Total \$ \_\_\_\_\_

Street Address \_\_\_\_\_

(\$20 ea after 1<sup>st</sup>) Sibling Discount \$ \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Discounted total \$ \_\_\_\_\_

Home phone ( ) \_\_\_\_\_ Work phone( ) \_\_\_\_\_

Paid at Registration \$ \_\_\_\_\_

Cell phone ( ) \_\_\_\_\_ E-mail \_\_\_\_\_

Balance Due \$ \_\_\_\_\_

Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_ Relation \_\_\_\_\_

All forms and payments should be mailed to CCC,

I have read the payment policies

PO Box 4115, Logan, UT 84323-4115

By registering, I release Cache Children's Choir, its officers and employees, from any liability or expense arising from my child's participation in the choir. In an emergency, every effort will be made to contact me. In the event I cannot be reached, I give permission to the licensed health-care practitioner selected by CCC to secure proper treatment for my child. I give permission for photographs or recordings containing my child to be used for promotional or choir use. I give permission for my singer's name, telephone number, and address to be printed and distributed for choir use, unless other arrangements have been made with the Artistic Director.

For Choir Use Only:

PB  SCH Check # \_\_\_\_\_

Signature of Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_