**Tri-City Youth Chorus Registration**

**Mail completed form and registration fee to:**

**Niles Discovery Church, PO Box 2265, Fremont, CA 94536**

Fall Session $155.00\_\_\_\_\_\_\_\_ Winter/Spring Session $155.00\_\_\_\_\_\_\_\_

(Sept-Dec) (Jan-April)

Child’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child’s Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child’s music experience (if any): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent/Guardian’s Email address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Mailing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone numbers: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Child’s birthdate: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade in school: \_\_\_\_ Gender: \_\_\_\_

**Behavioral Conditions:** Please provide any further information about behavioral conditions that we should know about, such as epilepsy, fainting, hyperactivity, asthma, etc. Other things we should know: Is there any additional information that would be helpful in promoting your child’s welfare while participating in the chorus? Please include any past or potential experiences that might be upsetting to your child.

**Photographs:** The chorus will follow Niles Discovery Church’s policy with regard to the use of photographs and videos: Unless you specifically opt out, we may take photos and video at chorus rehearsal and events and post them on the internet and in brochures. Opt-out forms will be available upon request.

**Parent Authorization:** I, the parent or legal guardian of the above named registrant, hereby gives permission for my child to participate in the Tri-City Youth Chorus. I understand that, should my child violate chorus rules, he/she may be asked to leave a rehearsal or even be asked to leave the chorus, without any reimbursement of registration fees. I understand that I am responsible for my child’s transportation to and from rehearsals and concerts.

Parent Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**CHORUS MEMBER COMMITMENT:** All participants are required to make and to sign this commitment. ●I will make every effort to attend every chorus rehearsal.

●I will pay attention to and follow the chorus director’s instructions.

●I will fully participate and stay focused during rehearsals and concerts, sharing my gifts and enthusiasm.

●I will practice my music diligently and memorize it as instructed.

●I will treat all chorus members with respect and compassion.

●I will help create a community of love, acceptance, and caring for all members.

Signature of Chorus Member \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_