



## Maranatha Christian Schools Performing Arts

Name of Participant (First, Last) \_\_\_\_\_

Grade \_\_\_\_\_ School \_\_\_\_\_ Birthdate \_\_\_\_\_

Address \_\_\_\_\_

Home Phone \_\_\_\_\_ Cell \_\_\_\_\_

Father's Name \_\_\_\_\_

Mother's Name \_\_\_\_\_

E-Mail \_\_\_\_\_

Allergies \_\_\_\_\_

**Waiver/Release Form:** I, the undersigned parent or guardian of \_\_\_\_\_, a minor, hereby grants permission for my son/daughter to participate in the **FALL MUSICAL** at Maranatha Christian Schools from **December 2019 – March 2020**

I/We hereby waive all claims that I/We might have against Maranatha Christian Schools, their officers, agents, employees, and any parties volunteering on behalf of Maranatha Christian Schools, for injury, accident, or illness occurring during, or by reason of any activity. I/We further agree to indemnify and hold harmless Maranatha Christian Schools, their officers, agents, volunteers, and employees against claim liabilities, penalties or loss resulting from or as consequence of said activity.

In the event I cannot be reached during a medical emergency, I do hereby authorize any examination, x-ray, anesthetic, medical or surgical diagnosis or treatment and hospital care rendered under the supervision of any physician or surgeon licensed under the provisions of the Medical Practice Act on the medical staff of a licensed hospital, whether such diagnosis or treatment is rendered at the office of said physician or at a hospital.

Further, as parent or guardian of the above-named minor, I do hereby consent that my son/daughter may receive emergency medical treatment from any physician, hospital, or other medical center without the necessity of first notifying me, and do further agree to be financially responsible for any such treatment and to hold blameless any physician, hospital or other medical center for rendering such services.

Insurance Co. Group: \_\_\_\_\_ Policy Number: \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_ **DATE** \_\_\_\_\_

**Performances: March 13 – 22 2020 at Maranatha Chapel**

**Rehearsals: (Begin 12/7) Saturdays: 9am. – 1:00 & Mondays 6:30 – 9:00 pm**

**Tuition Fees: (Due 12/7)**

**MCS Students: \$350.00 (one) - \$550.00 (2)**

**Non MCS Students: \$450.00 (one) - \$650.00 (2)**

**Payments accepted: Cash, Checks, Debit/Credit**

