



2015 LYRIC YOUTH SUMMER PROGRAM ENROLLMENT FORM

Thank you for your interest in The Lyric Theatre & Cultural Arts Center 2015 Youth Summer Programming! Our scheduled activities are designed to help your child gain a fuller appreciation and respect for the arts and self-expression while also becoming involved in their community. Below are some additional guidelines to help ensure a safe and rewarding experience for everyone involved. We look forward to sharing an enriching and rewarding camp experience with your child.

This form, the emergency contact form, and the parental obligation form are all due in order to register your child for courses. An original signature is required, faxes cannot be accepted. Please drop these off in person at The Lyric on 300 East Third Street, Lexington, KY 40508. For more information, please call (859) 280-2201.

Name of Parent/Guardian:

Name of Participant:

Date of Birth & Age:

Address:

City, State, ZIP Code:

Phone Number:

E-mail Address:

Class of Interest

(Please circle no more than one for each month)

African Drumming Class

Saturdays in **June**, 10:00 am – 12:00 pm
Ages 8 - 16

African Drumming Class

Saturdays in **July***, 10:00 am – 12:00 pm
Ages 8 - 16

Power of Words: Creative Writing

Saturdays in **June**, 10:00 am – 12:00 pm
Ages 8 - 11

Power of Words: Creative Writing

Saturdays in **July***, 10:00 am – 12:00 pm
Ages 12 - 16

Intro to Martial Arts

Saturdays in **June** 10:00 am – 12:00 pm
Ages 8 - 16

Message Theater: Acting Class

Saturdays in **July***, 10:00 am – 12:00 pm
Ages 13 - 18

***Due to the 4th of July falling on a Saturday, July classes will start on Saturday, July 11 and conclude on Saturday, August 1.**

I _____ (custodial parent) give my permission for _____ to attend the Lyric Spring Camp Program at the Lyric Theatre & Cultural Arts Center.

Important Information The Lyric Theatre & Cultural Arts Center is committed to conducting its programs and activities in the safest manner possible and holds the safety of participants in the highest possible regard. Participants and parents registering their children in programs and activities must recognize there is an inherent risk of injury when choosing to participate. The Lyric Theatre strives to reduce such risk and insist that all participants follow safety rules and instructions which have been designed to protect the participant's safety. Please recognize that The Lyric Theatre does not carry medical accident insurance for injuries sustained in its programs and activities. The cost of such medical expense would make program fees prohibitive. Therefore, each person registering him/herself or a minor for a program or activity should review his or her own health insurance policy for coverage. It must be noted that the absence of health insurance coverage does not make The Lyric Theatre & Cultural Arts Center automatically responsible for the payment of medical expenses. Your cooperation is greatly appreciated. _____ (INITIAL)

Release of Liability & Permission to Secure Treatment I recognize and acknowledge that there are certain risk of physical injury to participants in the above program(s) and I agree to assume the full risk of any injuries, damages or loss regardless of severity which I or my minor child/ward may sustain as a result of participating in any and all activities connected with or associated with such program(s).

I agree to waive and relinquish all claims my minor child/ward or I may have against The Lyric Theatre & Cultural Arts Center and its officers, agents, volunteers and employees as a result of participation in the program. I do hereby fully release and discharge The Lyric Theatre & Cultural Arts Center and its officers, agents, volunteers and employees from any and all claims from injury, damage or loss with the activities of the program(s).

I further agree to indemnify and hold harmless and defend The Lyric Theatre & Cultural Arts Center and it's officers, agents, volunteers and employees from any and all claims resulting from injuries, damages, and losses sustained by me or my minor child arising out of, connected with, or in any way associated with the activities of the program(s).

_____ (INITIAL)

In the event of any emergency, I authorize The Lyric Theatre & Cultural Arts Center to secure from any licensed hospital, physician and/or medical personnel any treatment deemed necessary for me or my minor child/ward's immediate care and agree that I will be responsible for payment of any and all medical services rendered. If your child has special needs for medication during the day or is on a drug holiday, please make those needs clear on this form. Be advised:

WE WILL NOT DISPENSE MEDICATION.

Camper Drop-Off

Drop-off for your program is at the Lyric's Cultural Arts side door (off 3rd Street).

Observe the 10MPH speed limit along the entrance road, as many children are present.

Park your car and escort your child or children to a staff person to confirm arrival on our attendance sheet.

Do not block traffic or park along the entrance road.

Children may be dropped off no sooner than 30 minutes prior to the start of the camp day.

Camper Pick-Up

Please pick up your child promptly at the end of the program. An additional fee will be charged daily for late pick-ups.

Park in the designated parking lot and be sure to sign your child out.

Anyone picking up your child will need to present a photo ID (i.e. driver's license) for release of your child. We will not release your child unless proper identification is given daily.

Anyone authorized to pick up your child from camp, including yourself, should be listed under CHILD PICK UP.

Please do not pick up a child without notifying the staff.

Tardy pick-up will be charged \$5 per 10 minutes, after a one-time warning. The Department of Children and Family Services will be contacted if we are not able to reach any of the emergency contacts after 60 minutes.

ADDITIONAL INDIVIDUALS PERMITTED TO PICK UP CHILD

1. NAME: _____

RELATIONSHIP (please circle one): Mother Father Aunt Uncle Other _____

CONTACT NUMBER: _____

2. NAME: _____

RELATIONSHIP (please circle one): Mother Father Aunt Uncle Other _____

PHONE NUMBER: _____

Photography Release:

give my permission for my child's picture to be used in advertisement for The Lyric Theatre & Cultural Arts Center. I have read and fully understand the above Release Liability and Permission to Secure Treatment and Photography Release.

Signature of or Parent/ Guardian

Date

Print Name

Personal Items:

All personal items brought to the program are your child's responsibility and must be labeled.

Leave all electronics, valuables, and pocketknives at home.

The Lyric Theatre, employees or volunteers are NOT responsible for any items lost, damaged or stolen.

Participants, please review the following guidelines with your child.

Your child is expected to:

Show respect to all participants, staff and nature.

Be pleasant to others and refrain from using foul language.

Refrain from causing harm to self, others participants, and staff.

Use equipment, supplies and facilities properly.

Stay with the group.

Always wear shoes.

Distribution of non-school materials does not imply sponsorships or endorsement of the contents by

Fayette County Public Schools.

EMERGENCY CONTACT INFORMATION

SUMMER PROGRAM INFORMATION

LYRIC THEATRE & CULTURAL ARTS CENTER

FIRST NAME		DATE OF BIRTH	
MIDDLE INITIAL		SOCIAL SECURITY #	
LAST NAME		EMAIL	
ADDRESS		PHONE	PHONE 2
CITY	STATE	ZIP CODE	

EMERGENCY CONTACTS

1 PARENT/GUARDIAN NAME		RELATIONSHIP	
PHONE 1		PHONE 2	
ADDRESS			
CITY	STATE	ZIP CODE	

2 PARENT/GUARDIAN NAME		RELATIONSHIP	
PHONE 1		PHONE 2	
ADDRESS			
CITY	STATE	ZIP CODE	

MEDICAL INFORMATION

PHYSICIAN'S NAME:	PHYSICIAN NUMBER:
INSURANCE PROVIDER:	INSURANCE POLICY NUMBER:
PREFERRED HOSPITAL:	MEDICATIONS/ SUPPLEMENTS YOU'RE TAKING:
ALLERGIES:	ANY OTHER MEDICAL INFO. WE SHOULD KNOW:

PLEASE NOTE THAT THE LYRIC WILL NOT DISPENSE MEDICATION TO ANY CHILDREN.

Parent/Guardian Obligation Contract

To provide the best and most well rounded educational and learning experience for my child, I agree, to the best of my abilities, to bring my child to each of the 2015 Lyric Summer Youth Programming sessions.

If I am unable to bring my child to a session, I will notify The Lyric within 48 hours of the session's occurrence that my child will be absent. If I fail to notify The Lyric of my child's absence in advance, I understand that The Lyric may take action to the extent of expelling my child from the program.

I understand that, should I realize I will not be able to bring my child to the 2015 Lyric Summer Programming Courses, that I will notify The Lyric so a child who may be on the waitlist for the course will be able to take part in the creative educational experience.

Parent/Guardian Signature

X _____

Date

