

### Parent/Guardian Information

(Please type or print)

Parent(s) or guardian(s) with whom you live: \_\_\_\_\_

\_\_\_\_\_ relationship: \_\_\_\_\_

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

City: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: \_\_\_\_\_

Mother's Day Phone \_\_\_\_\_

Father's Day Phone \_\_\_\_\_

**Include any cell phone #'s you would like us to have below:**

Mother's cell: \_\_\_\_\_

Father's cell: \_\_\_\_\_

**If you would like to receive audition directions and other NorthEnd information via email please fill out the following::**

Mother's email: \_\_\_\_\_

Father's email: \_\_\_\_\_

**Other emergency contact:**

Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Relation: \_\_\_\_\_

### HOLD HARMLESS CLAUSE

I, the undersigned parent/guardian assume all risks and hazards incidental in participating in the activity and hereby waive, release, absolve, indemnify, and agree to hold harmless NorthEnd Jazz and its owners, supervisors, instructors, and participants for any claims arising out of any injury to my self/child. I give permission to any NorthEnd representative to seek medical attention for my son or daughter or self in the event of a medical emergency and will be responsible for any accrued medical expenses. (Parent or guardian signature required for any participant under 18 years of age.)

By participating in the music program with Northend Jazz I agree that any images of myself or my child(ren) may be used by NorthEnd Jazz and may be included in promotional or informational brochures, newspaper articles, and/or newsletters relating to NorthEnd activities.

SIGNATURE \_\_\_\_\_

(signed by)

parent

guardian

participant

DATE \_\_\_\_\_

Find us at:

**northendjazz.net**

### FEES

First participant 1 x \$398 = \$398

# of siblings \_\_\_\_\_ x \$199 = \_\_\_\_\_

**TOTAL = \_\_\_\_\_**

Please make checks payable to: **NorthEnd Jazz**

Please mail completed registration to:

NorthEnd Jazz  
3006 - 118th Drive NE  
Lake Stevens, WA 98258

for more information go to

**http://northendjazz.net or e-mail:**

**gmetcalf@northendjazz.net**

or call:

**425-231-6869**

### Registration Form Summer 2012



### Student Information

(Please type or print)

name (first, m.i., last) \_\_\_\_\_

sex :  male  female

grade (in Fall): \_\_\_\_\_ birth date \_\_\_\_\_

Instrument(s): \_\_\_\_\_

School: \_\_\_\_\_

Band Director: \_\_\_\_\_

Performance groups: \_\_\_\_\_

number of years studied privately: \_\_\_\_\_  
(0,1,2,etc.)

Group requested:

- NorthEnd Big Band
- Jazz Lab  Beginning Jazz
- Jazz Combo

T-Shirt size (adults): S M L XL 2XL (circle)

### Registration Form

(another child from same immediate family)  
half price - registration

**Summer 2012**



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