

NYFC Created to Create Registration Form (Fall 2015)

- #1 - Musical Theatre (Tuesdays) ____ \$40.00**
- #2 - Youth Concert Band (Thursdays) ____ \$25.00**
- #3 - Youth Dance Ensemble (Thursdays) ____ \$15.00**
- #4 - Beginning Instrumental Music (Thursdays) ____ \$15.00**

Name: _____ D.O. B. _____

Health Card No.: _____

School: _____ Grade: _____

Home Address: _____

Parent/Guardian Name: _____

Email: **(required)** _____

Home Phone: _____ Daytime Phone: _____

Emergency Contact Person: _____ Phone: _____

Are there any allergies or medical conditions that we should be aware of?

CONSENT FORM

I, the undersigned, give permission for the youth in my care (please print) _____ to attend and participate in the Creative Arts Summer Day Camp -"Created to Create" set forth by NORTHUMBERLAND YOUTH FOR CHRIST. I also give permission for the person(s) in charge to seek medical assistance for my son/daughter (please circle one) in the event of accident or injury.

Furthermore I do not hold NORTHUMBERLAND YOUTH FOR CHRIST or any of its subsidiary programs responsible for any harm that may occur to _____ as a result of his/her willful participation in the event.

I DO_____, DO NOT _____ authorize NORTHUMBERLAND YOUTH FOR CHRIST to take, use and own, in perpetuity; names, photographs or recordings of the youth understanding that these photos or recordings may be used for public promotional purpose (newspaper articles, newsletters, etc.) NYFC does not sell or give away any recorded materials or mailing list information.

Printed Name of Guardian: _____ Signature: _____

Date: _____

Please fill in completely (one for each child you are registering) and return with the appropriate fees. THANK YOU! Contact Christine at christine@nyfc.org to reserve a spot.

**REGISTRATION AND CONSENT FORM
FOR CREATED TO CREATE
AFTER SCHOOL PROGRAMS 2015-2016**

**NYFC
P.O. Box 462
Cobourg, ON
K9A 4L1**



**905-373-4707
www.nyfc.org**