## HUBER JUNIOR CHOIR REGISTRATION FORM

NAME	AGE
SCHOOL ATTEND	GRADE IN SCHOOL
PHONE (to text to)	GENDER: MALE FEMALE
EMAIL	
	_CITYZIP
PARENT NAME	CELL #
(Please list main adult contact for child) EMERGENCY CONTACTS NAME/relationship	<i>C</i> ELL #
	CELL #
NAME/relationship	CELL #
T-shirt Size: Youth S Youth M Youth L	Adult: S M L XL
LIST PRIOR MUSIC/PERFORMANCE EXPERIE musicals & where)	NCES (instruments/lessons, School band, choir

<u>List dates and explanat</u>	ions for any conflicts	<u>:</u>	
Would you use a Faceboo	k closed group page?	YES NO MAYBE	
Any Allergies or Medical	Conditions we should !	oe aware of 2	
Any Allergies or Medical	conditions we should t	be aware of ?	_
	IFNIT.		
PARTICIPANT AGREEM  T will participate in all so		d learn my parts. I understand that if I	mice a
·		e excluded from performing. I will pay a	
•		espectful to everyone during rehearsals	
performances. I agree to		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	_		
Participant Signature: _			
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PARENT AGREEMENT (	for participants under	18 years of acc)	
		to years of age) chearsals/performances and will be on ti	ime to
		ectors of any absences as far in advance	
		House to post pictures online of my chil	
	•	roduction. I will provide some clothing for	_
costumes and agree to po	·	·	
T +- +	as Danamt Cianatuma		
1 agree to these guidelin	es. Farent Signature:		
		date rec'd	
*Make checks payable to Huber (	Opera House.		
See Chris Feichter for details or	availability of Huber Youth S	cholarships.	

PLEASE LIST ANY DATES YOU WILL **NOT** BE AVAILABLE FOR REHEARSALS.

Rehearsals will be held at the Huber on Saturdays (9:00-10:30) starting Oct. 2 Performance Date is Dec. 12.