

Dt _____ Ck _____ Ca _ Sc _ Dis _ Total _____

1494 Totts Gap Road, Bangor, PA 18013 (610) 588-5817 TottsGap.org arts@tottsgap.org

Student's Information (Adult Students, fill out this section and at least one emergency contact and sign at the bottom)

Student's Full Name _____ Date of Birth _____
 Address _____ Grade in August _____
 _____ Enrollment Code _____

Mother's Information

Name _____
 Address (if different) _____
 Email Address _____
 Home Phone _____ Work Phone _____ Cell Phone _____

Father's Information

Name _____
 Address (if different) _____
 Email Address _____
 Home Phone _____ Work Phone _____ Cell Phone _____

Emergency Contact Information

First Contact Phone Number	Name	Relationship to Student
_____	_____	_____
Second Contact Phone Number	Name	Relationship to Student
_____	_____	_____
Third Contact Phone Number	Name	Relationship to Student
_____	_____	_____

Medical Information (If necessary, please use a separate sheet and attach)

Allergies	Dietary Needs	Special Needs	Medications
_____	_____	_____	_____

By registering, parents and students agree to the following:

- Students must arrive 10 minutes before class time, and parents must arrive 10 minutes before the end of class. Do not be late. This will allow class to begin as scheduled with all students present. More than one late arrival may lead to student's dismissal. Children may not leave the building without a parent/guardian.
- Student must dress appropriately for class; dance attire for dance, "messy" clothes for art, etc.
- Parents are encouraged to relay any questions, concerns, or conflicts to the director of the program.
- Cell phones and electronics are not to be used and must be turned off during class! They may only be used during breaks.
- There is no tolerance for class disruption from students or parents. This includes but is not limited to; foul language, loud or obnoxious behavior, discrimination towards any student, parent, assistant, teacher, director, or TGAI representative. Any of the above or similar may result in student's dismissal from program.
- We ask for parents not to stay in classrooms during class time.
- Parents may be asked to volunteer time.
- Totts Gap Arts Institute is a smoke-free facility.

I, (parent's name) _____ have read, understand, and agree to the above rules and requirements provided by Totts Gap Arts Institute (TGAI) and to the best of my knowledge, have filled out completely and accurately all information requested. I also certify that the above named student has been examined recently by a physician, is physically fit, and has no pre-existing condition which would prohibit participation in the program. I authorize the TGAI faculty or its representative to obtain emergency medical treatment for the above named student if necessary, and I agree not to hold TGAI, its directors, faculty, staff or their representatives, in any way liable. I have provided the administration with a list of any medications taken on a regular basis and the reasons for taking them. I agree to be responsible for prompt and timely payment of any and all tuitions and fees due TGAI for the above named student. I understand that there are no refunds for early withdrawal and that tuition credit may be granted for students who have to withdraw for medical reasons. TGAI has my permission to photograph, videotape or film this student for promotional purposes.

Parent/Guardian/Student Signature _____ Date _____