

## 2024 Fall Enrollment Form (Returning Members)

Member Name:	<del></del>
Please fill in the entire chart.	
Parent/Guardian phone number	
Parent/Guardian email	
Parent/Guardian address	
Member phone number	
Member email	
Member address	
Emergency names & numbers	
Accommodation Needs	
	yes no Legal Guardian: th the Director to join the following companies:
Tuition for Fall 2024	
Theatre Company Only Dance OR Choir Company Only Theatre + 1 (Dance or Choir) Theatre + Dance + Choir Dance + Choir (no Theatre)	\$200 \$150 \$275 \$350 \$250

## **Sliding Scale Option/Installment Plan**

Contact Janet Hughes for an application for sliding scale or installment plan.

Email: <a href="mailto:admin@theatreforall.org">admin@theatreforall.org</a> or call 910-612-9487. You may also pick one up in person.

Payment Options. Please check the one you wis	sh to use.
Full payment, one-time	
Full payment, Installment Plan (monthly bill)	
Sliding Scale, Installment Plan (monthly bill) w	vith agreed upon amount
Installment Plan will include a monthly (not weekly)	) payment to be paid the first class of each month
until completion of agreed amount.	
To pay online: <a href="https://givebutter.com/tfatuition">https://givebutter.com/tfatuition</a>	
<b>NOTE</b> : Online payment includes a processing fee a	ina cnoose u for "Givebutter tip."
Please Provide Sizes: T-shirt Pant	Shoe
Liability Release <u>Signature Required for</u>	participation.
The undersigned hereby assumes all risk of injury, it participation in all TFA related activities (classes, perfilming, and social gatherings) and agrees to release from all liability, claims, demands, damages, costs, injury, loss, or damage to the undersigned.	erformances, rehearsals, community events, e, indemnify, defend, and forever discharge TFA
Member Signature	Date
Member signs only if they are their own guardian.	
Parent/Guardian Signature:	Date
Parent/Guardian signs only they have legally gained guar	rdianship in court.
Photo Release <u>Signature required for particular signature required for particular signature</u>	<u>rticipation</u> .
I grant Theatre For All Inc the right to take photogramember for whom I am guardian. I authorize Theat appropriate photographs and/or video footage, in prillustration, advertising, and web content.	tre for All to copyright, use, and publish
Member Signature	Date
Member signs only if they are their own guardian	
Parent/Guardian Signature	Date
Parent/Guardian signs only if they have legally gained gu	uardianship in court.
<ul> <li>I have previously received the following doc policy, Code of Conduct, and Grievance Pol space.</li> </ul>	
Member Signature	Date
Parent/Guardian Signature	Date