



PLEASE READ BEFORE FILLING OUT THE FORM.

Dear Parent or Guardian,

Thank you for your interest in enrolling your child in Playhouse on The Square's Summer Youth Theatre Conservatory Program. We are offering the choice of printed or electronic registration forms for your convenience.

If you wish to print your registration form and send your application in by mail, simply open the registration form and click the print button. Fill the form in completely and submit the form and payment to the address listed. Your application may also be faxed to (901) 728-5678.

Our electronic PDF form may be filled in by using either Adobe Acrobat or Adobe Reader. If you need a PDF reader, go to "[get.adobe.com/reader/](http://get.adobe.com/reader/)" and download the free reader. You will also be required to set up a signature file to electronically sign the document. This will act as your legal signature and is very easy to set up.

First, fill out all fields on the PDF forms, **leaving the signature field at the bottom of page 2 for last**. Please review the form for accurate information before signing the document. **Once signed, the document will lock all entries and you will not be able to change any of the data.**

Once you have signed the document, you will be prompted to save the file. Save the registration form to your computer and then click the "Submit Form" button in the top right hand corner of the document. Fill in your name and email address if prompted and click OK. You will then be prompted to use either "Desktop Email Application" or "Internet Email". Choose "Desktop Email Application" unless you wish to use a web service such as Gmail.

A Theatre for Youth representative will contact you via email within 3 - 4 days of receiving your registration form if received electronically, Please allow a week if sent by mail or fax. If you do not feel comfortable supplying your credit card information to us via internet, leave the credit card information blank, and we will contact you to arrange payment. **Forms can not be processed or a space held until the deposit or payment is made.** If you have any questions please contact us at [conservatory@playhouseonthesquare.org](mailto:conservatory@playhouseonthesquare.org) or (901) 728-5631.

# Summer Youth Theatre Conservatory 2015 Registration Form

**PLEASE COMPLETE BOTH SIDES OF THIS FORM. USE A SEPARATE FORM FOR EACH STUDENT. YOU MAY MAKE ADDITIONAL COPIES AS NEEDED.**

<b>TOTS@POTS Conservatory</b>				<b>Ages 5 &amp; 6</b>			<b>TOTS@POTS Session</b> <input type="checkbox"/>	<b>\$185.00</b>
Session 1	June 15 - June 19	8:30 am - 12:00 pm	<input type="checkbox"/>	Early Bird Discount (Due May 1st)	<input type="checkbox"/>		<b>- \$20.00</b>	
Session 2	June 15 - June 19	1:00 pm - 4:30 pm	<input type="checkbox"/>	Subscriber Discount	<input type="checkbox"/>		<b>- \$10.00</b>	
Session 3	July 6 - July 10	8:30 am - 12:00 pm	<input type="checkbox"/>	Multi-Student Discount	<input type="checkbox"/>		<b>- \$25.00</b>	
Session 4	July 6 - July 10	1:00 pm - 4:30 pm	<input type="checkbox"/>			Subtotal		
<ul style="list-style-type: none"> <li>• Season Subscribers enjoy a \$10.00 discount per session.</li> <li>• Two or more students from the same household may also take an additional \$25.00 discount per student from the enrollment cost.</li> <li>• Make a tax deductible donation to Theatre for Youth.</li> <li>• A deposit of \$30.00 will reserve your spot today!</li> </ul>								Donate to Theatre for Youth _____ Amount Due: _____

<b>Junior Conservatory</b>				<b>Ages 7 - 11</b>			<b>Junior Session</b> <input type="checkbox"/>	<b>\$350.00</b>
Session 1	June 1 - June 12	9:00 am - 3:00 pm	<input type="checkbox"/>	Early Bird Discount (Due May 1st)	<input type="checkbox"/>		<b>- \$25.00</b>	
Session 2	June 22 - July 3	9:00 am - 3:00 pm	<input type="checkbox"/>	Subscriber Discount	<input type="checkbox"/>		<b>- \$10.00</b>	
Session 3	July 20 - July 31	9:00 am - 3:00 pm	<input type="checkbox"/>	Multi-Student Discount	<input type="checkbox"/>		<b>- \$25.00</b>	
	After-Care	3:00 pm - 5:00 pm	<input type="checkbox"/>			After-Care	<b>+ \$100.00</b>	
<ul style="list-style-type: none"> <li>• Season Subscribers enjoy a \$10.00 discount per session.</li> <li>• Two or more students from the same household may also take an additional \$25.00 discount per student from the enrollment cost.</li> <li>• After-Care is available for an additional fee of \$100.00.</li> <li>• Make a tax deductible donation to Theatre for Youth.</li> <li>• A deposit of \$50.00 will reserve your spot today!</li> </ul>								Donate to Theatre for Youth _____ Amount Due: _____

<b>Senior Conservatory</b>				<b>Ages 12 - 17</b>			<b>Senior Session</b> <input type="checkbox"/>	<b>\$550.00</b>
Session	July 6 - July 24	9:00 am - 5:00 pm	<input type="checkbox"/>	Early Bird Discount (Due May 1st)	<input type="checkbox"/>		<b>- \$25.00</b>	
<ul style="list-style-type: none"> <li>• Season Subscribers enjoy a \$10.00 discount per session.</li> <li>• Two or more students from the same household may also take an additional \$25.00 discount per student from the enrollment cost.</li> <li>• Make a tax deductible donation to Theatre for Youth.</li> <li>• A deposit of \$50.00 will reserve your spot today!</li> </ul>								Subscriber Discount <input type="checkbox"/> <b>- \$10.00</b> Multi-Student Discount <input type="checkbox"/> <b>- \$25.00</b> Subtotal _____ Donate to Theatre for Youth _____ Amount Due: _____

**Make Checks Payable to:**  
Playhouse on the Square

**Mail Payment and Registration to:**  
Conservatory, Playhouse on the Square  
66 S. Cooper St. Memphis, TN 38104  
or fax to: (901) 728-5678

**Payment Information**

A non-refundable deposit will reserve your space. To qualify for the Early Bird discount, the balance must be paid in full by May 1st. Full payment must be received prior to the first class of each session in order for the student to attend. Refunds, minus the deposit for processing, will be made prior to the second day of attendance only. There will be a \$20 fee for all returned checks.

The following information is not required for Summer Youth Theatre Conservatory but may help us in seeking grants, locations for off-site programs, and much more.

\_\_\_\_\_  
Father's Place of Employment

\_\_\_\_\_  
Mother's Place of Employment

\_\_\_\_\_  
Place of Worship

Caucasian       Native American       Asian  
 African - American       Hispanic       Other

\_\_\_\_\_  
How did you hear about Summer Youth Theatre Conservatory?

**Payment Information**

Visa       Discover  
 Master Card       Cash  
 American Express       Check / Money Order

\_\_\_\_\_  
Amount Enclosed      \_\_\_\_\_  
Subscriber# (if applicable)

\_\_\_\_\_  
Credit Card or Check #      \_\_\_\_\_  
CC Expiration

\_\_\_\_\_  
Name On Card

For Office Use Only

# Summer Youth Theatre Conservatory 2015 Registration Form

**PLEASE COMPLETE BOTH PAGES OF THIS FORM.  
USE A SEPARATE FORM FOR EACH STUDENT.  
YOU MAY MAKE ADDITIONAL COPIES AS NEEDED.**

### T-Shirt Size

Child	Adult
<input type="checkbox"/> Small	<input type="checkbox"/> Small
<input type="checkbox"/> Medium	<input type="checkbox"/> Medium
<input type="checkbox"/> Large	<input type="checkbox"/> Large
	<input type="checkbox"/> X-Large
	<input type="checkbox"/> 2X-Large

Student's Full Name \_\_\_\_\_ Nick-name \_\_\_\_\_ Student's Cell Phone # \_\_\_\_\_

Student's Birthdate \_\_\_\_\_ Age \_\_\_\_\_ Gender \_\_\_\_\_ Entering Grade \_\_\_\_\_ School Attending \_\_\_\_\_

Parent or Guardian's Email *(This will be the email for all correspondence)* \_\_\_\_\_

Primary Parent or Guardian's Name \_\_\_\_\_ Home Phone # \_\_\_\_\_ Work Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_

Primary Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

List contact numbers for use in case primary parent can not be reached. List them in the order in which they should be contacted. Under relationship, tell us how the contact is related to the student (for example: grandparent, family friend, etc.). Use Type to indicate whether the phone number is for home, work, cell, etc.

Full Name \_\_\_\_\_ Relationship \_\_\_\_\_ Type \_\_\_\_\_ Phone # \_\_\_\_\_ Ext. \_\_\_\_\_

Full Name \_\_\_\_\_ Relationship \_\_\_\_\_ Type \_\_\_\_\_ Phone # \_\_\_\_\_ Ext. \_\_\_\_\_

List any health, mental, or diagnosed conditions of which the staff should be aware. Such knowledge will allow our staff to accommodate your child and provide the type of support he or she may need. This information will be kept strictly confidential and include any medications being taken, or known allergies.

---



---



---



---

Family Doctor or Pediatrician \_\_\_\_\_ Area Code \_\_\_\_\_ Phone # \_\_\_\_\_ Chart # \_\_\_\_\_

Playhouse on the Square takes every precaution in order to guarantee your child's safety while participating in its programs. It is understood that neither Playhouse on the Square, nor any of its employees can be held responsible for any incidents resulting in injury due to negligence on the part of the student, parent, or guardian. All photos and video recordings made of the student(s) during Summer Youth Theatre Conservatory are the sole property of Playhouse on the Square and may be used to promote the theatre and its programs.

I have read and understand the above statements.

Signature of Parent or Guardian \_\_\_\_\_ Date \_\_\_\_\_