



WOVOS Wednesday Registration, Fall 2019

Singer's Name _____ Date of Birth ____/____/____

Email: _____ School grade: _____

Parents Name(s): _____ Email: _____

Full Address: _____

Homeschool/School Name: _____ Choir Director's Name _____

Emergency and Health/Special Needs Concerns:

Emergency Contact: Parent's best number during the program hours _____

Other Emergency Contact (name and number): _____

Health Insurance Carrier: _____ Policy#: _____

Special Dietary Needs/Allergies _____

Physical Limitation/Medications/Other things we should know to better serve your child:

Names of people my child may be released to: _____

Media Release:

____My child may be photographed/filmed during the Festival. I understand that photos or videos may be posted on the internet and in newspapers with first names only.

Registration Fees: Fall Semester Tuition \$200- financial aid available based on need. *We do not want finances to be a barrier to anyone.* After school snack and dinner are included in the program. Enclosed is \$_____.

Schedule: Students may arrive from 2:30 pm on: Program begins at 3 pm, pickup time 6 pm (or 6:30 pm after dinner). Optional dinner at 6 pm for family members, available for additional weekly fee.

Parent/Guardian Signature _____ Date _____