



City of Selma Recreation and Community Services  
Performing Arts Company for Youth

Date Paid: \_\_\_\_\_



REGISTRATION FORM

Players Name \_\_\_\_\_ Date \_\_\_\_\_ Age \_\_\_\_\_  
Address \_\_\_\_\_ City, Zip \_\_\_\_\_  
Home Phone or Cell # \_\_\_\_\_ Emergency Phone # \_\_\_\_\_ Email Address (required) \_\_\_\_\_

SHIRT SIZE \_\_\_\_\_ (CHILD : SM., MED., LG. / ADULT : SM, MED, LG, XL, 2XL)

As a condition to my child's participation in the above program conducted or sponsored by the City of Selma, I understand and agree to the following: That the City, its officers, employees, and agents shall not be liable for any loss, damage, injury or liability of any kind to any person caused or arising from acts, omissions or negligence of the City, its officers, employees or agents relating to or arising from my child's participation in the above program. That I will defend, indemnify and hold harmless the City of Selma and its officers, employees and agents from and against any and all loss, liability, charges and expenses (including attorney's fees) and causes of action of whatsoever character which may arise by reason of participation in the above program or in any way connected therewith. The City of Selma does not provide accident, medical, liability or any other insurance for program participants. I also understand my child's picture might be taken as part of the program to promote our program on flyers, brochures, City website and marketing pamphlets.

Parent/Legal Guardian (sign) \_\_\_\_\_ Date \_\_\_\_\_

Parent/Legal Guardian (Print) \_\_\_\_\_

**Conflicts:** Please list any events that may conflict with rehearsals. Note: more than two non-informed missed rehearsals will result in replacement. **All dress rehearsals and performances are mandatory.**

**Volunteer Sign up**

We need volunteers to help run tickets, raffle, snack bar, and supervise during performances. To create a memorable performance we will also need people to help with the set, sewing, advertising, and fundraising. Please mark yes if you are able to donate time and what you will be most interested in.

Yes \_\_\_\_\_ No \_\_\_\_\_ Area interested \_\_\_\_\_

Name (please print) \_\_\_\_\_ Phone number \_\_\_\_\_