

Enrollment Form

Please complete this form and return to the registration desk.

Workshop/Production Fee- \$250.00 Admin/Insurance Fee- \$25.00 Costume Rental Fee- \$75.00

ALL FEES ARE NON-REFUNDABLE

- Checks should be made payable to MET
- Most credit cards accepted (\$5/ transaction fee)

(Please Print Clearly)

Area: Santa Clarita Valley _	SD-North County	SF Valle	v Fas	t San Gabriel Valle	Y Torrance	/South Bay	
Show Title:	_ 3D-North County _	01	;у шаз	t Jan Jabrier vand	sy ronance	730uiii bay	
							
Name as you would like it to appear in the souvenir program:							
Address							
City	State Zip Code						
City				State	Zip Code		
Phone Number			Emerger	Emergency Number			
Age (Today)	Date of Birth	Se	X 				
rigo (10day)	Date of Birth		<i></i>] Mala	Гот	ماء	
				Male	Fem	ale	
School (Today) Grade (Today)							
Parent/Guardian Name (Please PRINT)				E-Mail Address (one you check regularly) if available			
, , ,				, -	- -	,	
How did you have the program?							
How did you hear about the program?				Have you been in MET before?			
				Yes No			
By signing below, you acknowledge that the registration fee is non refundable and under no circumstances will it be refunded or							
transferred to another season/show. Also, your signature authorizes that any photographic and/or video taped images of your child may be used by MET for marketing and publicity purposes without further authorization from the parent/guardian and without							
financial or other compensation.							
Please sign for acknowledgement (must be 18 or older)							
For Office Han Only							
Por Office Use Only Date	Amount Paid					Staff Initials	
Date	Alliount Palu	Cash	Ch	eck - #		Stall Illitials	
	Credit Card						
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