

# Registration for Piano Pathways Summer Camp 2018

## Florentina Alexandru

June 4-8

Monday - Friday, 9am - 2pm

Campus Location: Orlando School of Music

4968 E. Colonial Dr.

Orlando, FL 32803

Name of Participant: \_\_\_\_\_ Birth Date: \_\_\_\_\_ Gender: \_\_\_\_\_

Musical Experience: \_\_\_\_\_

\_\_\_\_\_ School: \_\_\_\_\_

Second Participant (if applicable): \_\_\_\_\_ Birth Date: \_\_\_\_\_ Gender: \_\_\_\_\_

Musical Experience: \_\_\_\_\_

\_\_\_\_\_ School: \_\_\_\_\_

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Parent Name(s): \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Parent E-mail: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Address: \_\_\_\_\_

Street

City

State

Zip Code

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Registration Fee: \_\_\_\_\_ Quantity: \_\_\_\_\_ Total: \_\_\_\_\_

**Please circle the week:      June 4-8**

I, \_\_\_\_\_, agree to pay the mentioned price and understand that by registering my child in the Piano Camp 2017, I agree to release, indemnify and hold harmless the Piano Camp 2017 Staff, Florentina Alexandru, from and against any loss, damage, or liability. I am completely aware that I will be held financially responsible for any damage caused by my child to any of the instruments or equipment used during the camp. I also understand that once I pay for the registration, there will be no refund.

Parent Name: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

# Emergency Contact Information Form

Child's Name: \_\_\_\_\_  
Last First Middle

2<sup>nd</sup> Child's Name: \_\_\_\_\_  
Last First Middle

Address: \_\_\_\_\_  
Street  
\_\_\_\_\_  
City State Zip Code

## Insurance Information:

Compay: \_\_\_\_\_ Policy #: \_\_\_\_\_

Preferred local hospital: \_\_\_\_\_

Emergency Contact Name: \_\_\_\_\_  
Last First

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

If unavailable(2<sup>nd</sup> ) Contact Name: \_\_\_\_\_  
Last First

Cell Phone: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Work Phone: \_\_\_\_\_

**Comments:** (include any allergies and/or special medical or personal information you would want an emergency care provider to know – or special contact information)

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