

**Christian Youth Theater**  
**CLASS (OR CAMP) CONTRACT**  
**MEDICAL/PHOTO RELEASE & CLASS BEHAVIOR**

**Bring one signed copy of this form to your first day of class or camp. You will NOT BE ALLOWED TO ATTEND** (or audition) without this form completed and signed by you & your parents.

**MEDICAL/PHOTO RELEASE FORM AND INFORMATION**

*Minor Release Form*

If you or your child is involved in a Christian Youth Theater class or production, you are hereby advised that our organization does not carry Workman's Compensation Insurance for participants or volunteers. If you or your child should suffer an injury while participating in summer camp, you will be personally responsible for your medical or injury related expenses.

I give permission for my child \_\_\_\_\_ (child's name)  
 Born on \_\_\_\_\_ (child's birth date) to participate in the summer 2010. I also give permission to the designated adult supervisor in charge to secure emergency medical treatment for the minor named above. I also agree to hold CYT, and/or their assignees, harmless in the event of an injury or accident.

I hereby authorize and consent that CYT shall have the absolute right to copyright, publish, use, sell or assign any and all photographs, portraits or pictures, television spots, movie films, videotapes and/or sound recordings, or any part thereof, that have been taken of my child, or in which my child may be included in whole or in part.

Parent/Guardian Name (Please PRINT) \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Home Phone (\_\_\_\_) \_\_\_\_\_ Work Phone (\_\_\_\_) \_\_\_\_\_

Emergency Contact Name and Phone \_\_\_\_\_

Insurance Company, Policy # and Phone: \_\_\_\_\_

Medical Information (\*allergies, medications, etc.): \_\_\_\_\_

Adult in charge may give my child Tylenol:  Yes  No

**CYT Behavior Contract Agreement**

Please read the *CYT Behavior Guidelines* before signing below. The same guidelines for class apply for Summer Camp.

I know that participating in CYT is a privilege; I \_\_\_\_\_ (name of student) will:

*Initial Here*

\_\_\_\_\_ I understand and agree to *the General Guidelines*.

\_\_\_\_\_ I understand and agree to the *Activities, Classroom and Showcase Guidelines*

\_\_\_\_\_ I understand the *Consequences (Discipline Procedures)* if I choose not to follow the above guidelines.

I understand that behavior will be documented and may affect future CYT participation \_\_\_\_\_ (*Initial*)

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

*Student*

Signed: Date: \_\_\_\_\_ Date: \_\_\_\_\_

*Parent*