



Memphis Youth Arts Initiative

Student Enrollment Application

Welcome to Memphis Youth Arts Initiative! Use this form register your child for our performing arts program. This application will grant your child access and permission to attend practices and events after being submitted. Membership Agreements and Costs of this program are discussed in person. Application Fee is \$10 and can be paid on child's first day, via CashApp to \$MYAI19 (Trinika Dodson), or directly on our website using credit/debit card at www.memphisyoutharts.org

YOU MUST COMPLETE A NEW APPLICATION FOR EACH CHILD YOU WANT TO REGISTER PLEASE.

Applicant Information

Student Name: _____ Date: _____
Last First M.I.

Address: _____
Street Address Apartment/Unit #

City State ZIP Code

Parent Phone: _____ Email _____

Student Age: _____ Grade for 19-20 _____ Current School _____

1st Preference Art: _____ 2nd Preference Art: _____

Does the child have any experience in arts? YES NO If no, are you willing to learn at a slow pace? YES NO
☐ ☐ ☐ ☐

Have the child ever been on a team/studio? YES NO If yes, when? _____
☐ ☐

Have you or the child ever been dismissed from a team? YES NO
☐ ☐

If yes, explain: _____

Parent/Guardian Information & Emergency Contacts

Please list Parent/Guardian Information Below.

Full Name: _____ Relationship: _____
Address: _____ Phone: _____
Add't Phone _____

Full Name: _____ Relationship: _____
Address: _____ Phone: _____
Add't Phone _____

Full Name: _____ Relationship: _____
Address: _____ Phone: _____
Add't Phone _____

Disclaimer and Signature

I certify that my answers are true and complete to the best of my knowledge.

By signing below, I grant permission for my child to participate in ALL ACTIVITIES AND EVENTS under the control and direction of Memphis Youth Arts Initiative without any additional consent until my child has graduated, dismissed, or been removed from the program.

I, (The applicant) the undersigned, acknowledge, appreciate, and agree that: 1. The risk of injury from the activities involved in this program is significant, including the potential for permanent paralysis and death, and while particular skills, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist; and, 2. I KNOWINGLY AND FREELY ASSUME ALL SUCH RISKS, both known and unknown, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES or others, and assume full responsibility for my participation; and, 3. I willingly agree to comply with the stated and customary terms and conditions for participation. If, however, I observe any unusual significant hazard during my presence or participation, I will remove myself from participation and bring such to the attention of the Company immediately; and, 4. I, for myself and on behalf of my heirs, assigns, personal representatives and next of kin, HEREBY RELEASE, INDEMNIFY, AND HOLD HARMLESS MEMPHIS YOUTH ART INITIATIVE their officers, officials, agents and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used for the activity ("Releasees"), WITH RESPECT TO ANY AND ALL INJURY, DISABILITY, DEATH, or loss or damage to person or property, WHETHER ARISING FROM THE NEGLIGENCE OF THE RELEASEES OR OTHERWISE, to the fullest extent permitted by law. I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT. PARENTS/GUARDIANS OF PARTICIPANTS OF MINORITY AGE (UNDER AGE 18 AT TIME OF REGISTRATION) This is to certify that I, as parent/guardian with legal responsibility for this participant, do consent and agree to his/her release as provided above of all the Releases, and, for myself, my heirs, assigns, and next of kin, I release and agree to indemnify and hold harmless the Released from any and all liabilities incident to my minor child's involvement or participation in these programs as provided above, EVEN IF ARISING FROM THE NEGLIGENCE OF THE RELEASEES, to the fullest extent permitted by law. PLEASE TYPE YOUR FIRST AND LAST NAME BELOW TO COMPLETE APPLICATION AND ACCEPT AGREEMENT.

Signature: _____

Date: _____