Summer 2017

CARY-GROVE PERFORMING ARTS CENTRE (CGPAC)

21 Jandus Rd, Cary, IL 60013 www.cgpac.com
(847) 639-3800 scan and email to: cgpac1@gmail.com

Family Name: _____ _____
(Adult First) (Last) (Street Address)

_____ _____
(Preferred Phone) (City) (State) (Zip)

_____
(Alternate Phone) (E-mail Address)

Participant	Class Name	Week (1, 2, 3, 4, 5)	ID Code	Birthdate	M/F	Tuition Payment

Total Tuition due Upon Registration: $_____

New Family? If yes, please add $25.00 registration fee: $_____

Total Payment Enclosed: $_____

Please make checks payable to: CGPAC.

To pay by credit card, please call or come in to swipe your card. Also consider sending a payment from your online bank.

Accidents, Injuries and Photo Release: CGPAC will not assume responsibility for accidents or injuries occurring at any of our programs or on our property. It is recommended that participants review their personal insurance policies for coverage during leisure activities. Photographs may be taken during class or performance and may be used in promotional literature or on the website for the studio. By registering for this program you acknowledge this waiver of liability and release use of your child's photographs in print or electronically.