



Rhythm Factory Registration Form

| | | |
|-----------------------------|----------------|--|
| Child's Name: | | Enrollment Date: |
| Street Address: | | City, State, Zip: |
| Age: | Date of Birth: | (Check One): Female _____ Male _____ |
| School Currently Attending: | | Child's Grade (as of August 30, 20__): |

Child lives with (Check one): (Both Parents) _____ (Mother) _____ (Father) _____ (Other) _____

| | | | |
|--------------------|--------|--------------------|--------|
| Parent/Guardian #1 | | Parent/Guardian #2 | |
| Address | | Address | |
| City, State, Zip | | City, State, Zip | |
| Home Phone | () | Home Phone | () |
| Cell Phone | () | Cell Phone | () |
| Employer | | Employer | |
| Work Phone | () | Work Phone | () |
| Email Address | | Email Address | |

Person(s) who will take responsibility for the child(ren) in an emergency when the parent/guardian cannot be reached and who the child(ren) can be released to as a caregiver: (one person must be provided and verified)

| | |
|----------------------|----------------------|
| Emergency Contact 1: | Emergency Contact 2: |
| Home Phone: () | Home Phone: () |
| Cell Phone: () | Cell Phone: () |

Consent to contact your child's Physician in case of an emergency: Yes _____ No _____

| | |
|-----------------|--------------|
| Physician Name: | Phone () |
|-----------------|--------------|

The I Love Music Foundation (ILMF) will not be responsible for taking any child to the clinic or Emergency Room for emergency/medical treatment. The I Love Music Foundation will contact 911 in the event of an emergency and will immediately contact the parent or guardian of the child.

Current health issues/problems: _____

Medication, if any: _____

List any allergies and/or intolerance to food, insect bites, stings or other factors that result in a medical reaction. Please give clear instructions in the event of exposure: _____

Special Concerns: _____



**Rhythm Factory
Registration Form**

The Rhythm Factory

9501 Arlington Expressway #325
Jacksonville, FL 32225
(904) 379-7231
Email: info@rhythmfactory.org
www.rhythmfactory.org

Annual Registration Fee: \$50.00 (Includes: **Ballet**/Leotard & Tights; **Jazz & Modern**/ Sports Bra and Leggings)
Checks or Money Orders should be made payable to: The Rhythm Factory, Inc.

CONSENT AND RELEASE PERMISSION

I give my permission for the I Love Music Foundation to include my child in photographs, videotapes, and broadcasts used for publicity and promotion of the I Love Music Foundation. Yes _____ No _____

Parent/Guardian #1 Signature _____ Date _____

Parent/Guardian #2 Signature _____ Date _____

As a Parent/Guardian

I personally guarantee to pay upon request any fees that are due to the Rhythm Factory.

I agree to abide by the policies stated in the Parent/Guardian Handbook that is available online at www.rhythmfactory.org and that paper copies may be obtained upon request from the I Love Music Foundation.

Parent/Guardian #1 Signature _____ Date _____

Parent/Guardian #2 Signature _____ Date _____