

Event Registration: Date: _____

This Registration Form will only have to be filled out ONCE per school year unless you have changes in your information. All information MUST be filled out. If there is an answer of NONE, please enter the word NONE. Please print clearly. Thank you, ~The Barn Staff

First Name: _____ Last Name: _____

Email Address: _____@_____._____

If you do not want to be added to our email list please check here _____

Grade: _____ Age: _____

Parent's Cell Phone #: (_____) _____ - _____

Alt Parent Cell #: (_____) _____ - _____

Are there any Medical, Allergy, or Social issues that we should be aware of?

- I understand that by my child may be photographed and or video taped at this and future events held by Friends of Madison Youth, d/b/a The Barn. I also understand that these photos/videos may be displayed at the event, posted on The Barn's Website and social media, as well as possibly used for future publicity in the form of emails, newsletters, event promos, brochures, etc

- I understand that due to the environment of the event that my child may be photographed or videotaped but I do NOT give permission for any images or video footage to be used in any way.

Parent signature

Date