

• **Singer Information:**

- For **returning singers**, just indicate school, grade, Choir(s), and any contact info or medical updates.
- **Singers registering for Concert Choir for the first time** must pass a standardized audition (we will follow up with you).

Singer #1 _____ Date of Birth _____

(Write name as it should appear in programs.)

Street Address *(singer's primary residence)* _____

City _____ Zip _____ School _____ Grade in Fall 2024 _____

Race/Ethnicity _____ *(optional, for statistical purposes only. We value diversity and don't discriminate.)*

Pronouns _____ Singing Experience? _____

ECC Choir for which this singer is registering:

Concert Choir Youth Chorale Pops 1 Youth Chorale Pops 2 Story Choir Pope John XXIII School Choir

Singer #2 _____ Date of Birth _____

(Write name as it should appear in programs.)

Street Address *(singer's primary residence)* _____

City _____ Zip _____ School _____ Grade in Fall 2024 _____

Race/Ethnicity _____ *(optional, for statistical purposes only. We value diversity and don't discriminate.)*

Pronouns _____ Singing Experience? _____

ECC Choir for which this singer is registering:

Concert Choir Youth Chorale Pops 1 Youth Chorale Pops 2 Story Choir Pope John XXIII School Choir

Singer #3 _____ Date of Birth _____

(Write name as it should appear in programs.)

Street Address *(singer's primary residence)* _____

City _____ Zip _____ School _____ Grade in Fall 2024 _____

Race/Ethnicity _____ *(optional, for statistical purposes only. We value diversity and don't discriminate.)*

Pronouns _____ Singing Experience? _____

ECC Choir for which this singer is registering:

Concert Choir Youth Chorale Pops 1 Youth Chorale Pops 2 Story Choir Pope John XXIII School Choir

• **Parent/Guardian Information:** *(Family Choir adults, please list your contact info here.)*

Primary Contact: _____

Relationship to singer(s): _____

Cell Phone _____

Work Phone _____

Alt. Phone _____

Home email _____

Alt. email _____

Alternate Contact: _____

Relationship to singer(s): _____

Cell Phone _____

Work Phone _____

Alt. Phone _____

Home email _____

Alt. email _____

Emails listed above will go on our mailing list for weekly ECC notes and other member information.

• **Other Contact Information?** *In the space below, please provide any other contact information you would like us to have, e.g. names, addresses, phone numbers and e-mails of other caretakers or emergency contacts:*

Releases

• **Medical Release for Dependents:**

I agree to take all required precautions regarding communicable illness when sending my singer to rehearsals or ECC events. I understand that the ECC adheres to appropriate health protocols in conducting its rehearsals and events, and I will hold the ECC harmless if my singer or anyone in my family contracts a communicable illness while participating. In the unlikely event that my child becomes ill or is injured, and I, or the preferred physician or hospital named below, cannot be immediately contacted at the time of an emergency, and if in the judgment of the staff of the Evanston Children's Choir (ECC) immediate observation or treatment is necessary, I authorize the staff to send my child (properly accompanied) to the hospital or medical facility most easily accessible. I further authorize that facility and any of its staff or any licensed physician to perform any medical treatment deemed necessary upon my child. I agree to be fully responsible for all costs of such treatment. I release the ECC, its employees, and agents from any claim of liability in connection therewith.

Preferred Physician _____ Phone _____
Preferred Hospital _____
Insurance Carrier _____ Policy/Group Number _____

Please list any relevant health problems, allergies, or learning disabilities for any registering singer:

Please list any medications being taken by any registering singer that we should know about:

Is there anything else you would like us to know?

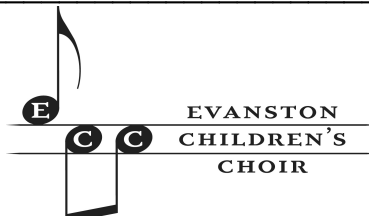
• **Photo/Audio/Video Release:**

I understand that audio recordings, photos, and/or video recordings may be published of Evanston Children's Choir (ECC) participants, including my child. I hereby give my consent for myself and/or my child to be audio recorded, photographed or video recorded in connection with participation in the ECC. I further agree that all such audio recordings, photos or video recordings shall be the exclusive property of the ECC and I release and give to the ECC all rights of ownership and all rights to copy, publish and use such audio recordings, photos and video recordings without compensation, except as may be agreed in advance for certain projects. I acknowledge and agree that the ECC may use any and all of those audio recordings, photos or video recordings for educational, promotional and fundraising purposes, including but not limited to publication in brochures and other promotional materials, on CDs for sale, and on the ECC website.

• **Guidelines & Information Confirmation:**

I understand that I am responsible for reading the entire **ECC GUIDELINES & INFORMATION for the 2024-2025 SEASON**, paying special attention to the sections on Rehearsals, Performances and Attendance. I will continue to keep up with current ECC information by reading all e-mails with "ECC" in the subject line, especially weekly e-mails after each rehearsal during the season. I will further keep up with current ECC information by regularly checking the ECC website for updates to my Choir's Rehearsal and Performance Schedules, and for uploaded Notes to Parents/Guardians that I may have missed via e-mail. If I do not have internet access or e-mail, I will request information in paper form.

➔ **Signature of Parent/Guardian** _____ **Date** _____



Please return this Registration Form, the Payment & Volunteer Options Form, plus any applicable fees to our office: **Evanston Children's Choir, 2110 Warren St., Evanston, IL 60202-1954**. You may also scan this completed form and send to gary@evanstonchildrenschoir.org, after which you can pay online via a secure link which will be sent to you.

Payment & Volunteer Options

Name(s) of Singer(s): _____

Parent(s)/Guardian(s): _____

• Tuition & Fees for 2024-2025:

There is a 30% sibling tuition discount for additional siblings in Youth Chorale Pops, Story Choir or the Pope John XXIII School Choir, and a 50% discount for additional siblings in Concert Choir.

- **Concert Choir:** \$510 tuition per semester, plus a one-time \$140 uniform charge
- **Youth Chorale Pops 1 or 2:** \$225 tuition per semester, plus a one-time \$25 uniform charge
- **Story Choir:** \$200 tuition per 9-week session (3 sessions per season); no uniform required
- **Pope John XXIII School Choir:** \$205 tuition per semester, plus a one-time \$20 uniform charge

• Payment Options:

Please choose one of the options below.

1. _____ I am able to pay standard tuition and fees.
2. _____ I choose to pay standard tuition and fees plus a donation of \$ _____.
3. _____ I request financial assistance. *Below, please indicate the total amount of tuition you are able to pay for the current semester, for all singers being registered and their respective Choirs combined (if unsure, write "TBD"). Please write any additional notes about your payment plans here (planned installment amounts, dates, etc.):*

• Volunteer Options:

Please note that by checking various volunteer options you are not locking yourself into those choices. You are simply giving us an idea as to your willingness, preferences and aptitudes.

Name of volunteer(s): _____

General Support:

- _____ Chaperone performances
- _____ Chaperone rehearsals (Youth Chorale, Story Choir and Pope John XXIII Choirs)
- _____ Help during misc. events (e.g. open house or other choir-sponsored events)
- _____ Process Annual Fund letters in late October/early November
- _____ Put up posters / distribute fliers around town
- _____ Research (grant opportunities, businesses with potential to donate items or services to ECC)

Help with the annual Spring Fundraiser in the following capacity:

- _____ Solicit silent auction donations in the months prior to the event
- _____ Pick up / drop off silent auction donations prior to event
- _____ Pick up / drop off volunteers for the event
- _____ Help during the event (e.g. helping with food & beverages, at the raffle or entrance table, etc.)
- _____ Set up / clean up

Specialized Support:

- _____ Grant writing
- _____ Organizing events
- _____ Photography
- _____ Musical accompaniment (instrument(s): _____)
- _____ Other (please specify: _____)