

PACIFIC UNIVERSITY STRING PROJECT

SPRING SEMESTER 2012 STUDENT APPLICATION

Student name: _____ Age: _____
Grade: _____

School name: _____

Name of parent (s) /guardians:

Home address:

City: _____ Zip:

Home phone: _____ Cell phone:

Email:

Emergency contact:

Name: _____ Relationship:

Phone: _____

PAYMENT INFORMATION: Due January 30, 2012 (to ensure enrollment postmarked by Jan.30)

Spring classes: Monday 5 –7 p.m. (50 minutes of large group classes and 50 minutes of small classes) starting February 1st ending May 7

Spring fees: \$100.00 (10 two hours long class sessions and public performance)

Indicate scholarship need: Yes No If Yes how much you'll be able to pay
(indicate the highest amount you can pay) \$_____

Make checks payable to: Pacific University String Project

Mail payments to: Pacific University, Music Department attn. String Project
2043 College Way Forest Grove, OR 97116

INFORMED CONSENT AND GENERAL RELEASE

As a condition of participation in learning activities situated on Pacific University property, wherever situated, Student's Parent/Guardian on behalf of Student agree as follows:

- Student and Parent/Guardian of Student on Student's behalf shall jointly share in the responsibility for Student's safety and ensure that Student refrain from endangering others who are participating in activities on Pacific University property;
- Student and Student's Parent/Guardian on behalf of Student acknowledge that there are inherent dangers in learning activities outside the elementary, middle school and high school campus environments;
- Should Parent/Guardian of Student become aware of an accident or injury sustained by Student on Pacific University property, wherever situated, Parent/Guardian agrees to promptly report same to Pacific University Vice President of Finance and Administration at (503)352-1621, 2043 College Way, Forest Grove, OR 97116.
- Learning activities situated on Pacific University property are voluntary;
- Student's Parent/Guardian expressly warrants and represents that Student currently is, and at all times during which Student participates in activities situated on Pacific University property Student shall be, covered by health and accident insurance providing benefits of no less than \$25,000.00 per

incident to cover risks of injury or illness associated with the activities in which Student participates.

- In case of emergency, accident or illness, Student's Parent/Guardian on behalf of Student, hereby grants permission for Student to be treated by a professional medical person and admitted to a hospital if necessary, and Parent/Guardian further agrees to be the party responsible for all medical expenses which are thereby incurred on Student's behalf.

Dated; _____

Signature of Parent/Guardian of Student

PLEASE REVIEW AND APPROVE INDEMNIFICATION AND RELEASE.
ADDITIONAL SIGNATURE REQUIRED

INDEMNIFICATION AND RELEASE

Parent/Guardian of Student on behalf of Student and Student's heirs and assigns, expressly agrees to indemnify, defend and hold harmless Pacific University, its trustees, officers, agents, employees, students and volunteers from all claims, suits, or actions of any nature arising out of Student's participation in activities situated on University property, wherever located, other than intentional or grossly negligent acts of the University, its trustees, officers, employees, students and/or agents.

By his/her signature below, Parent/Guardian warrants and represents that he/she is the parent or legal guardian of Student, and that Parent/Guardian assumes full risk for Student's voluntary participation in activities on Pacific University property, including but not limited to the general risks enumerated below:

General Risks

- Classroom facilities situated on Pacific University property are designed and equipped for adult use and frequently contain stairs, railings, windows, flooring, furniture, furnishings, chemicals and potentially hazardous substances that would not likely be found in elementary, middle school or high school learning environments.

By his/her signature below, Parent/Guardian warrants and represents that he/she has read this informed consent agreement and understands same and, further, that he/she agrees to be bound by the covenants, representations, warranties, conditions, indemnification provisions, assumptions of risk and consent contained in this consent agreement, and that the enforceability of provisions affecting liability, indemnification, insurance coverage and assumption of risk shall survive the termination of this agreement.

Signature of Parent/Guardian of Student

Date _____