



## 2018 SUMMER INTENSIVE REGISTRATION FORM

Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**SCHEDULE AND FEES** Please check the box next to the week(s) you will attend.

Eden's Expressway, 537 Broadway, New York, NY 10012

12:30-2:30pm – Warm Up and Technique Class, 3:00-6:00pm – Repertory Workshop

**WEEK I: June 18-22, 2018 — Fee: \$280**

**WEEK II: June 25-29, 2018 — Fee: \$280**

**WEEKS I & II: June 18-22 & June 25-29, 2018 — Discounted Fee: \$520**

All participants must be 18 or older. Participants must take the full day (no partial days).

**PAYMENT INFORMATION** Please check the box next to your payment method.

**Pay by Check:** Please make checks payable to: **Trisha Brown Company, Inc.**

Mail registration form and check to: **Stacy Spence, TBDC Director of Education, 341 West 38th Street, Suite 801, New York, NY 10018**

**Pay Online via PayPal:** Please note a processing charge will be added to the registration. Visit [www.trishabrowncompany.org](http://www.trishabrowncompany.org) to submit payment.

Please remember to also **submit the signed registration** form by mail or email a scanned form to [education@trishabrowncompany.org](mailto:education@trishabrowncompany.org).

### RELEASE FORMS AND WAIVERS

**Liability Waiver:** I hereby waive, release and forever discharge TBDC and its principals, officers, directors, agents, insurers, and employees from liability from any and all claims, actions, and causes of action (including resulting from negligence) that may at any time result from my participation in the TBDC Summer Intensive, including any such that relate to costs, expenses or damages to my personal property, personal injury or illness (including death).

I confirm that I am in good health and physically fit to participate in the Intensive. I assume all risks of any damage, injury or disability to my person or property that may occur as a result of my participation in the Intensive and acknowledge that I will be solely responsible for any and all costs and expenses that I may suffer as a result of my participation in the Intensive. I hereby give up any right that I might otherwise have to sue for injury or damages resulting from my participation in the Intensive.

**Photo Release Agreement:** I grant TBDC employees and representatives the right to take photographs of me and to use my likeness in photographs or video taken at the Intensive. I authorize TBDC to use and publish these photographs with or without credit. I waive any right to compensation arising or related to the use of these photographs.

By signing below I confirm that I have read and accepted the conditions to my participation in the Intensive as set forth above. I understand that I am giving up substantial rights including the right to sue.

Applicant Agrees (signature required): \_\_\_\_\_ Date: \_\_\_\_\_

**Refunds:** Requests to withdraw registration must be received by **May 18, 2017** in order to receive a refund, minus administrative fees. Confirmation of registration will be sent via email to the address provided above. Payment will be returned if the intensive week is full or canceled.

For additional questions, visit [www.trishabrowncompany.org](http://www.trishabrowncompany.org) or email [education@trishabrowncompany.org](mailto:education@trishabrowncompany.org).