

## REGISTRATION FORM – EARLY BIRD DISCOUNT 2021 Virtual Winter Intensive

Name:	Date of Birth:
Address:	
Phone:	Email:
SCHEDULE AND FEES:	
-	d Registrations (on or before December 18, 2020) ue Class, 1-1:30pm Lunch Break, 1:30-3:30pm Repertory &
All participants must be 18 or older, and take the	ne full Intensive. (No partial registrations)
PAYMENT INFORMATION:	
Pay securely with PayPal/Credit Card on the www.trishabrowncompany.org/educ	ne TBDC website: ation/intensives Note: There is a \$5 PayPal processing charge.
Once you complete payment, email signed Registration Form to <a href="mailto:education@trishabrowncompany.org">education@trishabrowncompany.org</a> . Then TBDC will send you confirmation of registration with the Intensive Zoom link.  RELEASE FORMS AND WAIVERS:	
Liability Waiver: I hereby waive, release, and forever discharge TBDC and its 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 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. I hereby give up any right that I might otherwise have to sue for injury or damages resulting from my participation in the Intensive.	
photographs and Zoom recordings of me and t	I grant TBDC employees and representatives the right to take o use my likeness in photographs or video taken at the Intensive. I graphs or footage with or without credit. I waive any right to ese photographs or video footage.
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 Signature:	Date:
Payment will be returned if the Intensive is full or cancelled.	