

**2007 Arts in the Mountains : Summer Music and Arts Festival
Music Education : International Music Performance: Community Spirit
Saint Francis University : Loretto, PA**

August 2, 3, 4, 5, 2007

www.ArtsMtn.com

ARTS IN THE MOUNTAINS REGISTRATION APPLICATION FORM

We respect your privacy. The information you give us will not be shared or sold with anyone.

Please Complete:

Personal Information:

Name: _____

Age: _____ (Note: If under 18, Parent/Guardian signature is required. Presenter reserves the right to deny admittance to any student under the age of 18)

Birth date: _____

Male Female

Current Address: _____

City: _____ State: _____

Zip: _____

Telephone: (_____) _____

E-mail: _____

Permanent Address (if different from above):

City: _____ State: _____

Zip: _____

Telephone: (_____) _____

Parent/Guardian Information (if under 18 years of age) :

Name: _____

Current Address: _____

City: _____ State: _____

Zip: _____

Home Tel: (_____) _____

Bus. Tel: (_____) _____

Emergency Contact Information:

Name: _____

Home Tel: (_____) _____ Cell Phone: _____

Are you taking the Arts in the Mountains for University Credit or Act 48
(additional fees apply)_____

Are you registering through one of our faculty member? If so,
Who?_____

I am registering for (circle only): Summer Rhythm Renewal, Universe of
Song, Guitar Masters Series.

How did you hear about the event?_____

PROGRAM COST:

Program cost: \$299 if you register by March 1, 2007. \$349 if you register after
March 1, 2007

Those wishing to take one of the following programs for University credit or Act
48 credit receive a 50% discount on the program cost. Contact the Office of
Continuing Education for credit pricing. 814.472.3012

UNIVERSITY CREDIT : ACT 48 CREDIT

Additional fee for University credit or Act 48 is \$322

The Stafford Loan is available to students taking 6 or more credits during the
summer.

* I understand that Program costs and Housing fees are non-refundable
Please initial here_____.

PRIVATE CONSULTATIONS:

As a way to further enhance and personalize your experience, this year we are
offering a limited number of private one-on-one consultations/lessons with our
faculty. This is a rare opportunity to get personalized attention to issues that
matter the most to you. Availability of these sessions are very limited and will be
scheduled on a first come first serve basis. Check our website for detailed
descriptions of the many subjects being offered.

Private Consultation: (\$75 per hour)

How Many Sessions would you like to purchase:_____

With which faculty member(s): _____

* I understand that Private Consultation fees are non-refundable

Please initial here _____.

* You will receive a schedule of your private sessions upon arrival at the festival. If the faculty members' schedule is full your money will be promptly refunded.

PROGRAM DEPOSIT:

If you wish to reserve your place in the program, you must send in a non-refundable \$100.00 deposit with the enclosed Registration form by April 31, 2007.

Enrollment is limited. Participation in the program is only guaranteed if tuition has been paid. Students will not be admitted to class until all fees are paid in full.

HOUSING:

On campus Housing: On campus housing is available from 37.00 per day for simple no frills un-airconditioned single dorm style room. Bring your own towels and linens or have them provided for you for an additional \$10 per day. Meals cost \$7 per meal (Buffet style, quite good!).

A limited number of air-conditioned rooms are also available at a rate of 53.00 per person for a single; 41.00 per person for a double. Meals and linens included.

Local hotels are also available for those who prefer different accommodations. Please see our website for more information. www.ArtsMtn.com

FORM OF PAYMENT (check one and fill in required information)

Enclosed is my check for \$ _____
made payable to: Saint Francis University

Please charge \$ _____ to my: Visa MasterCard Discover

Card Number _____

Exp. Date _____

Name as on Card _____

Signature as on Card _____

Mail forms and payment to:
Saint Francis University
Office of Continuing Education
Raymond Hall 203 c/o Julie Horvath
P.O. Box 600 Loretto, PA
15940-0600

To pay by phone via Credit or Debit card
Contact the Office of Continuing Education
Phone: 814-472-3012
jmhsf1@mail.francis.edu

CONSUMER STATEMENT OF UNDERSTANDING AND AGREEMENT FOR PARTICIPATION

REFUND POLICY:

Deposits and tuition are non-refundable. Deposits will be applied toward your tuition cost. If you are not accepted into the program due to lack of space, your money will be refunded. It is the responsibility of the participant and guardian (if applicable) to make sure that the participant is using the program to his/her best interest.

WAIVER AND RELEASE:

I hereby agree to participate in Arts in the Mountains 2007 given by Saint Francis University; its officers, directors, employees, agents and/or assigns (herein called the "Presenter") upon the understanding and conditions that:

1. I represent to the Presenter that I am physically capable of participating in this program and that, to the extent necessary, I have consulted with my personal physician or other health authority before making such representation.

2. I recognize the risk of illness and injury inherent in this program and I am participating in the Presenter's program upon the express agreement and understanding that I hereby waive and release the Presenter from any and all liabilities, claims, costs, expenses and/or judgments, including attorney's fees and court costs (herein, collectively "claims") arising from my participation in the Presenter's programs and/or any illness and/or injury resulting there from. I hereby agree to forever indemnify and hold harmless the Presenter from and

against any and all such claims.

3. I agree to inform the Presenter before participation in any of its programs of any change in my physical condition that might in any way adversely affect my ability to participate in the program safely. I further understand and agree that Presenter may deny my participation in the program should my physical condition change in any way that might adversely affect my ability to participate in the program safely. In such case all deposit and tuition monies I have paid will be refunded.

PROMOTIONAL RELEASE:

I hereby understand and agree to the possible use of my name, photo and/or image/likeness, and/or recording of my voice/instrumental performance in promotional material and/or general public media including but not limited to: television, radio, internet/websites, newspapers, advertisement, and other columns.

I hereby understand and agree to the terms and conditions of this CONSUMER STATEMENT OF UNDERSTANDING AND AGREEMENT FOR PARTICIPATION in its entirety.

Student Signature Date

If Student is Under 18:

I affirm that I have read, understand and agree the above Arts in the Mountains Consumer Statement of Understanding and Agreement for Participation. I further certify that I am the legal guardian of the student whose signature appears above and that I am financially responsible for any outstanding balances due for participation in this program. In addition I certify that I hereby consent to this student's participation in the program.

Parent/Guardian's Signature Date