

**2008 Arts in the Mountains : Summer Music and Arts Festival**  
**Summer Rhythm Renewal : Universe of Song : Guitar Workshop Series**  
**Saint Francis University : Loretto, PA**  
July 31, August 1, 2, 3, 2008  
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: \$279 if you register by May 1, 2007. \$299 if you register after May 1, 2008

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, 2008.

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.**

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](http://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 Lois Quist

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 2008 given by Saint Francis University; it's 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.

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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.

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Parent/Guardian's Signature      Date