



# Registration Form

Please Make Copies if Needed!

Please Print or Type

Mail completed form with \$30.00 Registration Fee to:

LOUISIANA THEATRE FESTIVAL

809 Kirby Street; Suite 313

Lake Charles, LA 70601

337.377.2571

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Lake Charles, LA 70601  
337.377.2571  
www.LTF.cc

**To pay your registration fee online, click the secure Pay Now button on the homepage. Then, complete the registration form and mail immediately to confirm your registration.**

Date of Registration: \_\_\_\_\_

Name of Student: \_\_\_\_\_

LAST

FIRST

Home Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Parent Cell: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Parent Cell: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Student Cell: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Parent's Name: \_\_\_\_\_

Home Mailing Address \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Parent E-Mail Address: \_\_\_\_\_

Student E-Mail Address: \_\_\_\_\_

Student's Age: \_\_\_\_\_ Birthday: \_\_\_\_/\_\_\_\_/\_\_\_\_

School Attending: \_\_\_\_\_

Grade: \_\_\_\_\_

The undersigned hereby releases and agrees to hold harmless the Louisiana Theatre Festival and all respective agents, employees and representative of the aforementioned entities from any and all claims, demands, actions and causes of action as a result of the delegate listed above participating in the Louisiana Theatre Festival, Central School of the Arts & Humanities, Lake Charles, Louisiana. The undersigned further agrees to be responsible for him/herself while traveling to and from said Festival including any expenses incurred by the delegate, caused by the delegate and / or any personal injuries which may occur to the delegate. The undersigned agrees to abide by the conference's security rules and regulations with the understanding that should any problems occur with the delegate during the Festival, the delegate will be returned home and parents, guardian or next of kin of the delegate will be financially responsible for all necessary costs incurred. The undersigned also realizes that festival registration fees are non-refundable. The undersigned further understands that should a major medical problem arise, he/she will be notified by telephone.

The undersigned hereby grants to the Louisiana Theatre Festival permission to make photographs of the delegate at said festival for use in coverage of the event, advertising, and for any lawful purpose without compensation to the delegate. The undersigned certifies that he/she has read and fully understands this authorization.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Student Signature

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date