



Performance Camp
Caylia Chaiken Music Studio

415 383 5395 www.chaikenmusic.com

REGISTRATION FORM

Student Name:	_____	Age:	_____	Grade in Fall '19	_____
School:	_____	Female:	_____	Male:	_____

Parent Name:	_____	Parent Name:	_____
Address:	_____	Address:	_____
City, State, Zip:	_____	City, State, Zip:	_____
Home Phone:	_____	Home Phone:	_____
Cell Phone:	_____	Cell Phone:	_____
Email:	_____	Email:	_____

Emergency Contact:	_____	Relationship to Child:	_____
Home Number:	_____	Cell Number:	_____
Work Number:	_____		

Mail Check to: Caylia Chaiken Music Studio 775 E. Blithedale Avenue #213 Mill Valley California 94941

Credit Card Number:	_____	Exp:	_____	CVV:	_____
Name on Card:	_____	Mailing Address:	_____		
City:	_____	State:	_____	Zip Code:	_____

PLEASE SIGN: I have read and understand this Registration Form: _____ **Dated:** _____

PLEASE CHOOSE YOUR CAMP

ONE WEEK CAMPS

- ☐ **CAMP 1: June 17, 18, 19, 20, 21 AT 9:00-3:00pm \$585.00**
- ☐ **CAMP 2: August 5, 6, 7, 8, and 9 AT 10:00-4:00pm \$585.00**
- ☐ **CAMP 3: August 12, 13, 14, 15 and 16 AT 10:00-4:00pm \$585.00**

ONE DAY CAMPS

- ☐ **CAMP 4: June 28 FRIDAY AT 10:00-4:00pm "HOW TO ACE YOUR AUDITION" \$175.00**
- ☐ **CAMP 5: August 2 FRIDAY AT 10:00-4:00pm "OVERCOMING YOUR FEAR OF PERFORMING" \$175.00**
- ☐ **CAMP 6: August 19 MONDAY AT 10:00-4:00pm "PERFORM FROM STAGE TO CLASSROOM" \$175.00**

By registering to the Caylia Chaiken Music Studio Summer Camps, I hereby agree to indemnify and hold harmless Caylia Chaiken from and against any and all liabilities for any injury which may be suffered by me or my child arising out of or in any way connected with participation in the program noted above. In case of an emergency, my emergency contact will be notified. I give permission to use my or my children's photograph in the Caylia Chaiken Music Studio brochures and website for publicity.