

# Mt. Tabor ARTs Collaborative

## Broadway Intensive with Gerry McIntyre

Intensive Location:

Tabernacle  
26 Simpson Ave.  
Mt. Tabor, NJ



When: June 9, 2019

Ages 10-college

1-5:00pm

Mail form w/ full payment to:

Mt. Tabor ARTs Collaborative  
PO Box 155  
Mt. Tabor, NJ 07878  
Tel: 201-873-2537  
[www.taborarts.org](http://www.taborarts.org)



**Sunday, June 9 –1:00p.m. – 5:00p.m.**

**Cost: \$75.00**

Name \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Day Phone \_\_\_\_\_ Eve Phone \_\_\_\_\_

Minor's Age \_\_\_\_\_ Minor's Adult Contact \_\_\_\_\_

Emergency Contact & Phone \_\_\_\_\_

Broadway Intensive: Number of Children \_\_\_\_\_ Cost \$75.00 \_\_\_\_\_

Payment enclosed (check/money order payable Mt. Tabor Arts Collaborative, no cash by mail please).

Total: \_\_\_\_\_

**All Students: By submitting this form you indicate that you agree to abide by the school policies including the refund policy that states—No refunds. I/We the parents of the above named child do hereby give my/our approval to his/her participation in any and all activities. I/We do assume all risks and hazards incidental to the conduct of the activities and transportation to and from the activities and do further hereby release, absolve, indemnify and hold harmless the Mt. Tabor Arts Collaborative, Gerry McIntyre and the organizers, sponsors, and supervisors, any or all of them. In case of injury, to my/our child I/We waived all claims against the organizers, the sponsors, or any of the supervisors appointed by them.**

Signature required \_\_\_\_\_ Name (please print) \_\_\_\_\_

**Tel: 201-873-2537 email: [TaborArts@aol.com](mailto:TaborArts@aol.com) [www.mttaborarts.org](http://www.mttaborarts.org)**

**PO Box 155 Mt. Tabor, NJ 07878**