

ROCK ACADEMY

@ THE GRAND



REGISTRATION FORM

This form must be completed prior to enrollment. Please return with payment to:
The Grand, 818 N. Market Street, Wilmington, DE 19801 or fax 302-652-5346

SIX-WEEK SESSIONS: SATURDAYS, 10am-12pm

January 14 – February 18, Showcase on Sunday, 2/19

March 17 – April 21, Showcase on Saturday, 4/21

Student Name _____

Sex (M/F) _____ Age _____ Instrument _____

Parent/Guardian _____

Address _____

Phone _____ E-mail _____

Emergency contact (include Name, Relationship, Phone) _____

Tuition: \$175/session per student. Payment in full must accompany registration form.

Enclosed is my check, payable to Grand Opera House.

Please charge my credit card: \$ _____

American Express

Visa

MasterCard

Discover

Card number _____

Exp. date _____ Security code _____

Photo Release: By signing this form, I hereby consent to and authorize the use and reproduction, in print or electronic format by The Grand Opera House, Inc. or anyone authorized by The Grand Opera House, Inc., of any and all photographs or videos taken of me or my child while participating in the Rock Academy program for any publicity purpose, without compensation. All images (electronic, negatives and positives, video and prints) are owned by The Grand and/or its photographers. I hereby acknowledge that I have read and agree to the terms of this release.

Signature (Student if age 18 or older, or Parent/Guardian)

Date