



2018 MONTHLY SHOW CHOIR AUTO-RENEWING REGISTRATION FORM

Please fill out this registration form in its entirety to avoid delays in processing. If you have any questions regarding classes, please contact the Education Department at 978-232-7200 ext. 7289 or email: education@nsmt.org

Student Name: _____ DOB: _____ Age: _____

Parent/Guardian: _____

Email: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: (_____) _____ - _____

Please charge to: _____ Visa _____ MasterCard _____ American Express _____ Discover

Card #: _____ Exp. Date: _____

Name on card (print): _____ Sec. Code: _____

I hereby authorize ***The North Shore Music Theatre*** to charge the above credit card a fee of \$75.00 on the first of every month for my child's continued participation in the North Shore Music Theatre Show Choir, until December 17, 2018 or until I send a notice of cancellation. I understand that I must send a notice of cancellation 2 weeks before the first of the month via email to the Director of Education at lwoodcock@nsmt.org.

By signing below I understand the above terms and conditions for my child's participation.

Parent's/Guardian's Signature: _____ Date: _____

Please make checks payable to: **North Shore Music Theatre**
Mail registration form to: **ATTN: Education Department**
62 Dunham Road, Beverly, MA 01915