# **2021 WYOMING FINE ARTS FESTIVAL**

REGISTRATION FORM | REGISTRATION DEADLINE: FEBRUARY 12, 2021

1. REGISTRANT INFO	RMA	TION							
Registrant Type: 🗖 Fir	ne Arts	s Participan	t 🗆	] Non Participant A	ttendee				
Name				Grade	Age	Birth Date	/ /	Gender a	t Birth □M □F
Last		First		2020/2021	On 09/01/20	ō			
Mailing Address									
	umber	Street	Apt.	City		State.			Zip
Phone Number <u>(</u>	)			Email					
2. CHURCH INFORM	ATION	1							
Namo									
NameOfficial Church Name	-ii-			Church City	(	Church State			
Youth/FA Leader									
, First a	nd Last N	ame							
Email				Youth/FA Lead	er Phone Nu	mber <u>(</u> )	-		
Mailing Address	mber	Street		Apt.	City	State	Zip		
3. MEDICAL AND PH				-	·		·		
5. WIEDICAL AND PH		KAPH/ VIDE	U RELEASE	5					
Registrant's Full Name	e (Plea	se print)							
programs and activities, social media, reports, pr	er staff Wyomi y (or m I give p ess rele by me N.	f to administe ing Ministry I ny child's) par permission to eases, Web s (or him/her)	er any neces Network (W ticipation in the WMN a ites, and exl about the p	sary treatment imm MN), nor the church the Fine Arts Festive and its agents, to use nibits) any image or rogram, and to use r	ediately to me es involved, n al and Youth S e in connectio recording in w my (or his/her	e (or my child) sh or its respective Summit. To prom n with any public which I (or he/she ) name in connec	ould I (or he officers and ote, evaluat cation (inclue ) appear(s), ction with ar	e/she) be si staff respo e, or other ding but no to use and ny publicat	ck or injured during the onsible for any injury or wise describe the WMN's t limited to brochures,
s there anything in th	e regis	strant's med	dical histor	y staff should be a	ware of in ca	ase of a medica	l emergeno	ςγ?	
Emergency Contact	Fi	rst and Last Name			Emergen	cy Phone (	)		
4. SIGNATURES									
REGISTRANT SIGNATU	IRE <sup>(req</sup> have com	uired regardless of a pletely read and i	<i>f age)</i> understand the 2	2021 Fine Arts Official Rule E	ook, guidelines, an	d medical release and v	Date	/	_/
PARENT SIGNATURE <sup>(r</sup>	equired fo	or ALL registrants	under 18)				Date	1	1
Your signature indicates that you	understa	nd and support yo	ur child's involve	ement in Fine Arts and will a	bide by all rules, gu	uidelines, and medical	and other release	/ e.	/
PASTOR SIGNATURE <sup>(r</sup>	equired fo	or ALL Fine Arts Pa	rticipants)					,	1
PASTOR SIGNATURE '	of this st	udent's participat	ion in Fine Arts a	ind confirms he/she attends	your church or yo	uth group.	Date	/	_/



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# 5. FINE ARTS CATEGORY SELECTION

Please select <u>all</u> categories you wish to register for.

1. Entry Name	4. Entry Name
Category	Category
	Members (If applicable)
2. Entry Name	5. Entry Name
Category	Category
	Members (If applicable)
3. Entry Name	6. Entry Name
Category	Category
Members (If applicable)	Members (If applicable)

(To ensure that everyone is placed in the correct group(s), please list the members of your group(s) and accompanists. All group lists must match others in the group.)

#### 6. REGISTRATION FEE

## Step 1: (Choose One)

- Event Registration Fee: (By Feb 12) \$40.00
  - Late / At the Door Fee: \$ 50.00 (NON PARTICIPANTS ONLY)

### Step 2: (Participants Choose One)

- 1 Fine Arts Category \$15.00
- 2 Fine Arts Categories \$30.00
- 3 Fine Arts Categories \$30.00
- 4 Fine Arts Categories \$45.00
- 5 Fine Arts Categories \$60.00

### **PAYMENT INFORMATION:**

CHECKS - Please make your checks out to Wyoming Ministry Network Mail registration forms and payments to: Wyoming Youth - Attn: Jeremiah Feicht, PO Box 2988, Casper, WY 82602

