UNIVERSITY OF Redlands
SCHOOL OF PERFORMING ARTS

COMMUNITY SCHOOL OF MUSIC AND THE ARTS
2026-2027 Music Explorers

☐ New ☐ Continuing

☐ Fall classes begin September 10, 2026

☐ Spring classes begin January 14, 2027

Student's name _____ Gender _____ Date of birth ____/____/____

Mailing address _____ City _____ Zip code _____

Preferred phone number _____ Email address _____

Guardian 1's name _____ Primary phone _____

Guardian 2's name _____ Primary phone _____

Tuition (registration will be accepted until classes are full)**:**

Please select a class:

☐ **$162 Rhythm Explorers** (ages 3-5)
Thursdays 5:00 – 5:30 pm (12 weeks)

☐ **$224 Suzuki Explorers** (ages 3-4)
- ☐ ***at the piano*** (max 4 students)
- ☐ ***with strings*** (max 4 students)

Thursdays 4:30 – 5:30 pm (12 weeks)

Payment Method: (please select one)

☐ Check enclosed (payable to CSMA) Check # _____ Check amount _____

☐ Credit Card * Amount to charge _____

** For security, payment information is not kept on file. You may also call (909) 748-8844 to process payment by phone.*

Credit Card # _____ Expiration____/____

Security Code _____ Signature _____

BY SIGNING BELOW, I UNDERSTAND AND AGREE TO THE FOLLOWING:

- Any outstanding balance from previous terms must be paid in full in order to register.
- Full payment for the semester is due upon registration.
- No refunds will be issued after the second class.

_____ _____

Student or Parent/Guardian Signature (if student is under 18) Date

Participant Release and Waiver of Liability,
Assumption of Risk, Covenant Not to Sue, and Indemnity Agreement

In consideration of being permitted to participate in voluntary event entitled **Music Explorers** at the University of Redlands, I, on behalf of myself, my executors, heirs, administrators and assigns, hereby voluntarily agree to release, waive, discharge, indemnify, hold harmless, and covenant not to sue the University of Redlands its trustees, officers, employees, agents, volunteers, or other promoters, operators or co-sponsors of **Music Explorers** for any and all claims, damages, costs, attorney's fees, or causes of action which I have or may have in the future, or which third parties have or may have in the future, as a result of damages, injuries, including death, relating to **Music Explorers** or travel to and from **Music Explorers** arising out of or incident to any negligent act or omission by the University of Redlands, its trustees, officials, officers, employees, agents, volunteers, or other promoters, operators or co-sponsors of **Music Explorers**. I knowingly and voluntarily give up valuable legal rights, including the right to sue. Further, I shall defend at my own expense, including attorney's fees, with an attorney selected by the University of Redlands, the University of Redlands in any action or proceeding, legal, administrative or otherwise, based upon such acts, omissions or willful misconduct.

I understand and agree that there are risks of harm associated with participating in **Music Explorers**, which may give rise to bodily injury, and/or property damage. These risks include, but are not limited to, **lifting heavy equipment, going up and down stairs with equipment, or outdoor activities in inclement weather.** I understand that I will be responsible for my own transportation. I further understand and agree that there may be risks and dangers not known or reasonably foreseeable at this time. I understand and agree that included within the scope of this waiver and release is any cause of action, arising from the performance of or the failure to perform maintenance, inspection, supervision or control of **Music Explorers**, or the failure to warn of existing dangerous conditions not known to or reasonably discovered by the University of Redlands, including all acts of negligence of the University of Redlands. I, the negligence of others, or by the negligence of the University of Redlands, its trustees, officials, officers, employees, agents, volunteers, or other promoters, operators or co-sponsors of **Music Explorers**, may cause these risks and dangers. I knowingly and voluntarily assume full responsibility for these risks arising out of or related to my participation in **Music Explorers**.

I further expressly agree that this agreement is intended to be as broad and inclusive as is permitted by the laws of the state or country where the Activity takes place and that if any portion of the agreement is held invalid, it is agreed that the balance shall, notwithstanding, continue in full legal force and effect.

I HAVE CAREFULLY READ, AND I UNDERSTAND, ACKNOWLEDGE AND AGREE TO THIS RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT. I UNDERSTAND THAT I AM GIVING UP VALUABLE LEGAL RIGHTS BY SIGNING THIS AGREEMENT, AND THAT THIS AGREEMENT REPRESENTS A CONTRACT BETWEEN THE UNIVERSITY OF REDLANDS AND MYSELF. I HAVE AGREED TO SIGN THIS AGREEMENT OF MY OWN FREE WILL.

Signature Date

If the participant is under eighteen years of age, a parent's or legal guardian's signature is required for each minor child.

This Release and Waiver of Liability, Assumption of Risk, Covenant Not to Sue, and Indemnity Agreement shall be binding on me and my minor children, executors, heirs, administrators and assigns. I further agree on behalf of my minor children that this Release and Waiver of Liability, Assumption of Risk, and Indemnity Agreement shall be binding on them and their executors, heirs, administrators and assigns.

I HAVE CAREFULLY READ, AND I UNDERSTAND, ACKNOWLEDGE AND AGREE TO THIS RELEASE AND WAIVER OF LIABILITY, ASSUMPTION OF RISK, AND INDEMNITY AGREEMENT. I UNDERSTAND THAT I AM GIVING UP VALUABLE LEGAL RIGHTS BY SIGNING THIS AGREEMENT, AND THAT THIS AGREEMENT REPRESENTS A CONTRACT BETWEEN THE UNIVERSITY OF REDLANDS AND MYSELF. I HAVE AGREED TO SIGN THIS AGREEMENT OF MY OWN FREE WILL.

_____

Print Name of Minor

_____

Print Name of Parent/Guardian

_____

Parent/Guardian Signature

_____

Date Phone Number

VIDEO/PHOTO/AUDIO CONSENT FORM

I, _____ ("Participant"), do hereby consent to and authorize the University of Redlands ("University") to copy, record, exhibit, publish, distribute or use my name, image, likeness, voice, or sound in any media, including but not limited to video, audio, photo, or any composite and artistic forms, in which the record is incorporated in whole or in part, regardless of whether these materials are used for fundraising, advertising, publicity, or any other lawful purpose on behalf of the University.

In addition, I waive all claims to compensation or damages based the University's use of any material authorized by this consent. I also waive any right to inspect or approve any finished material in which my name, image, likeness, voice, or sound appears.

I hereby hold harmless and release and forever discharge the University from all claims, demands, and causes of action which I, my heirs, representatives, executors, administrators, or any other persons acting on my behalf or on behalf of my estate have or may have by reason of this consent.

I understand that this consent is perpetual, that I may not revoke it, and that it is binding on me, my heirs and assigns.

I warrant that I am either at least 18 years of age or that I am the legal guardian of the minor Participant, and that I am competent in my own name insofar as this consent is concerned, and that I have the full right and authority to grant this consent. I further attest that I have read this consent form and fully understand its contents.

Description of media:

Photography

Video Recording

Audio Recording

_____

Printed Name of Participant

_____

Age of Participant

_____

Address of Participant

_____ _____

Signature of Participant Date

_____ _____

Signature of Parent or Legal Guardian of Participant (if under 18) Date

Return completed form to the Community School of Music and the Arts (CSMA):

● Email: csma@redlands.edu ● Mail: 1200 E Colton Ave, Redlands, CA, 92373