

2026-2027 REDLANDS YOUTH SYMPHONY

Fall 2026 & Spring 2027 Registration

☐ New ☐ Continuing



Meets weekly on Tuesdays from 6:30pm – 8:30pm:

- University Hall Valencia Room or Memorial Chapel (see schedule)
- Students must arrive 10-15 minutes early for setup, tuning and warmup

Fall semester dates:

- Fall semester begins September 1, 2026
- Fall 2026 concert on Sunday, November 15, 2026, 6:00pm (Memorial Chapel); Call time 5:30pm

Spring semester dates:

- Spring semester begins January 12, 2027
- Spring 2027 concert on March 21, 6:00pm

** Dates and times are subject to change due to facilities availability*

STUDENT INFORMATION:

Student Name

Date of Birth

Mailing Address

City

Zip Code

Preferred Phone

School Grade (in Fall 2026)

Instrument

PARENT/GUARDIAN INFORMATION (for students under the age of 18):

Parent/Guardian Name

Primary Phone

Secondary Phone

Email Address

TUITION:

\$150 per semester. Full payment is due upon registration.

Payment Method: (please select one)

- ☐ Check enclosed (payable to CSMA) Check # _____ Check amount _____
- ☐ Credit Card (*payments may be made over the phone if preferred: 909.748.8844*)

Credit Card # _____ Expiration _____ / _____

Security Code _____ Signature _____

ATTENDANCE POLICY:

- Consistent, on-time attendance is required. Communicate with directors prior to any anticipated absences or conflicts.
- **3 Absences:** Student will be demoted to the last chair of their section.
- **4+ Absences:** Student will not be permitted to play in the final concert.
- **Tardiness:** Excessive tardiness may result in seat demotion.
- **Notification:** Notify RYS@redlands.edu regarding any absences or tardiness.

Concert Dress Code:

- Concert Black with optional splashes of white, grey, and maroon.

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

- Any outstanding balance from previous terms must be paid in full in order to continue in subsequent terms.
- Payment for the semester is due upon registration.
- No refunds will be issued after the second class.
- **If registering for the Fall 2026 term, I will be automatically enrolled in the Spring 2027. Should I need to withdraw from Redlands Youth Symphony, I will promptly notify the CSMA office by phone or email.**

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 **Redlands Youth Symphony** 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 **Redlands Youth Symphony** 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 **Redlands Youth Symphony** or travel to and from **Redlands Youth Symphony** 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 **Redlands Youth Symphony**. 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 **Redlands Youth Symphony**, 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 **Redlands Youth Symphony**, 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 **Redlands Youth Symphony**, 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 **Redlands Youth Symphony**.

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
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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