



Participant Information Form

(This form is REQUIRED from every person attending the 2022 Festival.)

These forms MUST be received in the ACC Office by February 1st.

Category: (Circle one) Chorister Chaperone Choir Staff Other Traveler/Family

Name(as you would like it on your nametag): _____

Home Address: _____
 Street City State Zip

Chaperone/Staff/Parent/Other email: _____

Chorister email: _____

Home Phone: _____ Chaperone/Staff/Parent /Other Cell Phone: _____

Polo size (circle one): **Youth:** XS(4) S(6-8) M(10-12) L(14-16) XL(18-20)
(ladies size runs a little small) **Ladies:** XS(2) S(4-6) M(8-10) L(12-14) XL(16-18) XXL(20-22)
 Men's: S M L XL XXL 3XL

CHORISTER ONLY: Birthdate: _____ Height: _____ Vocal Part (circle one): **SI** **SII** Alto
In 2-parts (circle one): **Soprano** Alto

All Participants: Please indicate if you have dietary restrictions OR requests (e.g. vegetarian, allergies, etc): _____

EMERGENCY CONTACT INFORMATION

Name: _____ Relationship to participant: _____
 First Last

Address: _____
 Street City State Zip

Home Phone: _____ Work/Cell Phone(1): _____

Work/Cell Phone(2): _____

MEDICAL RELEASE:

In the unlikely event that my child becomes ill or is injured and I cannot be immediately contacted at the time of the emergency, and if in the judgment of the staff of the Appalachian Children's Chorus immediate observation and/or treatment is necessary, I hereby authorize and direct the staff of the ACC to send my child (properly accompanied) to the hospital or physician most easily accessible. Further, I release the ACC and their employees and agents from any and all claims in connection therewith.

IN FULL UNDERSTANDING OF THE ABOVE STATEMENT, I SIGN BELOW:

Signature of Parent or Guardian: _____ Date: _____