



Individual Payment Form for Thanksgiving Day Parade

Thursday, Nov. 22, 2018 on **State Street, Downtown Chicago!**

REGISTER BY SEPTEMBER 21, 2018.

HURRY....TIME IS A TAPPING!

Individual Name: _____

Dance Studio: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Cell: _____

Day of Parade Contact: _____

Payment Method

Please include **ONE check or credit card per individual.**
Checks made payable to *Chicago Human Rhythm Project (CHRP).*

Return form and payment by September 21, 2018:

Chicago Human Rhythm Project
c/o Yvonne-Jill Afable
410 S. Michigan Ave., Studio 464
Chicago, IL 60605

Card Number: _____ Exp: _____

Name on Card: _____ CVV: _____

Billing Address: _____ Same as above

Signature: _____ Date: _____

I hereby authorize my credit/charge/debit card to be charged in the amount of US \$50.00. By signing this form, you give us permission to debit/charge your account for the amount indicated on or after September 21, 2018

Participant Agreement

I, _____, am responsible for the safety of my students in all of the Chicago Human Rhythm Project. Pending any incidents of injury, I release CHRP, and all its locations, from liability.

Signed: _____

Title: _____