

MUSICAL THEATER SUMMER INTENSIVE Registration Form

Please provide all information requested.

Online registrations take up to 24 hours to process. Confirmations are sent by e-mail.

Participant Name _____

Date of Birth ____/____/____ Age as of June 1, 2010 _____

Entering grade ____ in September 2010. *Pparticipant must be entering 6th grade or older.*

Street address _____

City _____ State _____ Zip _____

Home phone _____ E-mail address _____

Primary contact _____

Work number _____

Secondary contact _____

Work number _____

My preference in majors is acting voice dance All majors will have classes in all disciplines.

TUITION includes a NON-REFUNDABLE deposit of \$100 per participant. There is no refund if a participant is withdrawn less than a month before Summer Intensive begins.

Tuition is \$600.00

Monday, June 28 through Saturday, July 3

Intensive Classes and Workshops are 3 - 9 p.m.

Enclosed is my check for _____. (Minimum of \$100 deposit due now. Post-dated check dated May 15 for Balance must be attached.)

Charge my credit card in the amount of _____ (Minimum of \$100 deposit due now. Balance must be received by May 15.)

You are authorized to charge my credit card for current payment, and if applicable, balance due on May 15.
Visa, Mastercard, Amex, and Discover accepted

Expiration date _____

Card number _____

Billing address if different from above _____

Comments? Questions? _____
