

2008 **ACTING** REGISTRATION FORM

Mary Jo's Performing Arts Academy

PLEASE PRINT LEGIBLY

Student's Full Name: _____ Nickname: _____
 Mailing Address: _____ City: _____ State: _____ Zip Code: _____ - _____
 School: _____ Grade: _____ Date of Birth: _____ Age: _____
 Primary Phone Number: _____ Student Cell Phone: _____ Student e-mail: _____
 Legal Guardian(s): ___ Both Mother & Father ___ Mother ___ Father Other: _____
 Mother OR Guardian Name: _____ Mother's e-mail: _____
 Home Phone: _____ Cell#: _____ Beeper#: _____
 Mother's Address: _____ City: _____ State: _____ Zip Code: _____ - _____
 *Mother's Place Of Employment: _____ Phone#: _____
 Father OR Guardian Name: _____ Father's e-mail: _____
 Home Phone: _____ Cell#: _____ Beeper#: _____
 Father's Address: _____ City: _____ State: _____ Zip Code: _____ - _____
 *Father's Place Of Employment: _____ Phone#: _____

I give permission for myself or my child to be photographed and/or videotaped during the concert and for MJPAA promotional purposes.

Initial _____

I understand MJPAA cares about each student and their safety, therefore:

MJPAA faculty and staff cannot supervise students that leave the Academy before, between or after class.

Any and all trips should be with parental supervision and permission.

Initial _____

MJPAA faculty and staff have commitments throughout the day to teach class and assist in the office. If you realize you will be more than 15 minutes late after your child's class is over, please contact the Academy immediately. I understand late fees may be assessed.

Initial _____

I have been informed tuition is not refundable and that I am responsible for tuition until written notice has been received by MJPAA. I realize emergencies will be taken under advisement. I also understand monthly billing statements are not mailed.

Initial _____

Please check which class you are registering for:

Adult Acting

Acting 101 8-14

Level I Musical Theatre

Youth Theatre 2nd semester

Cabaret Production

Business of Show Biz/Commercial

Broadway Babies

Clean Up Your Act (Adult)

Acting Sampler 3 weeks