

FIRST STAGE THEATER ACADEMY SUMMER 2018

REGISTER ONLINE TODAY AT WWW.FIRSTSTAGE.ORG!

Please print clearly and duplicate this form to enroll more than one child in a family. Any omitted information below will delay registration. Please complete front and back.

COMPLETE YOUR PERSONAL INFORMATION

Student's Name (First) _____ (M.I.) _____ (Last) _____
Home Address _____ City _____ State _____ Zip Code _____
Home Phone (____) _____ Work/Cell Phone (____) _____ E-mail _____
Parent/Guardian name _____

CHECK YES OR NO

This is my child's first Academy class of any kind. Yes No

- If you answered "yes," you must add a \$20 new student fee to your total.
- If you answered "yes," you are encouraged to choose one NEW STUDENT ORIENTATION SESSION (see listing on page 5 for options).

NEW STUDENT ORIENTATION DATE: _____ LOCATION _____

CLASS SELECTION (Please see "Class Listing" Pages):

- Please indicate choices in order of your preference.
- If your first choice is not available at time of registration, you will be registered in the next available choice noted.
- In the event that all choices are filled, you will be placed on a wait list for the first choice.

1ST Choice

Class Code _____ Class Description _____ Dates _____ Location _____ Tuition\$ _____

2ND Choice

Class Code _____ Class Description _____ Dates _____ Location _____ Tuition\$ _____

3RD Choice

Class Code _____ Class Description _____ Dates _____ Location _____ Tuition\$ _____

FOUR WEEK (FM) STUDENTS ONLY: Please indicate your major preference.

MAJOR Choice 1 _____ Choice 2 _____ Choice 3 _____

CHECK PAYMENT METHOD:

- MasterCard
 Visa
 Discover
 American Express
 Personal Check

Name

Signature

Card#

Expiration Date ____ / ____

TUITION

Class tuition total + \$ _____

New Student (one-time application fee \$20) + \$ _____

Extended Care + \$ _____

_____ K-4 Morning _____ K-12 Afternoon

_____ 5-12 Morning

Please accept my tax deductible donation to the
ACADEMY SCHOLARSHIP FUND. + \$ _____

Each student will receive one T-shirt.

Order for extra T-shirt (Optional)

Qty.	Merchandise	Price	Size(s)	Total (Qty. x Price)
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_____	T-shirt	\$10	_____	\$ _____
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Merchandise Total (T-shirts) + \$ _____

Subtract Sibling Discount (per class per student) \$20 - \$ _____

GRAND TOTAL = \$ _____

Full Payment enclosed

Automatic charge payment (\$75 due now and remainder will be charged on Friday, June 1. Please provide credit card that expires June 2019 or later.)

Please note: Class prices are subject to change.

(Form continued on back)

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(CONTINUED)

Gender (Circle one) M F Student's Ethnicity: (Optional, grant reporting purposes only) _____

Date of Birth ___ / ___ / ___ MPS Yes No Grade in Fall of 2018 _____ School in Fall of 2018 _____

Student has permission to: ride bus bicycle drive walk

If enrolled, I would like my child to be a part of the carpool list. Yes No

EMERGENCY CONTACT INFORMATION

Please provide Emergency Contact information for someone other than parent.

Emergency Contact Name (First) _____ (Last) _____

Emergency Contact Relation to Child _____

Emergency Phone _____ Type _____

Emergency Phone (alternate) _____ Type _____

Parent Place of Employment _____

If your student has any medical conditions we should be aware of, please disclose them below. Please also list any potential emotional issues or special needs so that we can best serve your student. Our staff will keep the information confidential and will be better prepared to make the session more enjoyable for your student.

First Stage occasionally takes photos and/or video of our Theater Academy classes for promotional use.

Check here if you do NOT want your child's image used in our promotional materials.

MUST BE SIGNED TO PARTICIPATE

As a condition to my child's participation in the First Stage Theater Academy, I hereby release and hold harmless First Stage Theater Academy, First Stage Milwaukee, Inc., the Milwaukee Youth Arts Center, Sharon Lynne Wilson Center for the Arts, Academy of Performing Arts and all of their respective owners, employees, agents and representatives, from and against all claims, damages and other liabilities whatsoever, including but not limited to personal injury, illness or property damage, which relate in any way to my child's participation in the First Stage Theater Academy.

signature of parent/guardian

date

Please mail to:

First Stage Theater Academy 325 W. Walnut St. Milwaukee, WI 53212 or FAX to: (414) 267-2976

QUESTIONS? Call (414) 267-2970 or email academy@firststage.org