

REGISTRATION FORM Fall '08

STUDENT & FAMILY INFORMATION

Please use one Registration Form per student. Please print all information.

Student's Name	<input type="text"/>	Gender	<input type="text"/>
Student's Age	Birth Date <input type="text"/> / <input type="text"/> / <input type="text"/>	Current Grade	<input type="text"/>
Street Address	<input type="text"/>		
City	State	Zip	
Home Phone #	Fax #	<input type="text"/>	
Student's E-Mail	Would you like to receive PGT e-mail updates? Yes No		
Mother's Name	E-Mail	<input type="text"/>	
Work #	Cell #	<input type="text"/>	
Company	Occupation	<input type="text"/>	
Father's Name	E-Mail	<input type="text"/>	
Work #	Cell #	<input type="text"/>	

ACTOR TRAINING PROGRAM

	2008 FALL ACTOR TRAINING PROGRAM	\$1250
	Discount (second sibling -\$150 for each additional child after first)	
	Tax-Deductible donation (thank you!)	
	TOTAL DUE	
	Enclosed Full Payment or Deposit (50% minimum deposit through September 1)	
	Balance (postdated check enclosed or credit card payment - payable September 1)	
AUDITION APPOINTMENT*:	Preferred Audition Date (Tues. 9/2, Wed. 9/3, Thur. 9/4 or Mon. 9/8)	
	Preferred Audition Time (6-7pm, 7-8pm or 8-9pm)	

*We do our best to accommodate your preferred time. An Audition Appointment Confirmation Letter will be sent to you, letting you know the specific time and date of your audition

CLASS SELECTION

Class Selections	Class Title	Day	Time	x Fee	= SubTotal
Core and Conservatory Weekday Classes with a \$75 discount for each additional class after the first	1. <input type="text"/>	<input type="text"/>	<input type="text"/>	\$250	
	2. <input type="text"/>	<input type="text"/>	<input type="text"/>	\$175	
	3. <input type="text"/>	<input type="text"/>	<input type="text"/>	\$175	
Little Theatre Classes with a \$75 discount for each additional class after the first Please fill out your preferred Class days	Day		Time	\$250	
	First Choice <input type="text"/>		<input type="text"/>		
	Second Choice <input type="text"/>		<input type="text"/>		
Tax-Deductible donation (thank you!)					
TOTAL DUE ENCLOSED (Full Amount due upon registration)					

PAYMENT OPTIONS

See next page for Class & Payment Policies. Please complete Volunteer Form on back of this form prior to returning to PGT office. You may pay by check or complete credit card info below. Payment by check preferred. Please make checks payable to The Play Group Theatre.

Or circle one: MASTER CARD VISA AMEX (NOTE: the security code is on the rear of you MC or VISA and on the front of your AMEX)
 I authorize the following charge to be made to my credit card. In addition, I authorize payment of any balance owed to be charged to the same card, on or after September 1, 2008.

Card Number <input type="text"/>	Exp. Date <input type="text"/>	Security Code <input type="text"/>
Signature <input type="text"/>	\$ Amount <input type="text"/>	

PLEASE SEND THIS FORM, ALONG WITH YOUR PAYMENT TO: **PGTheatre**
200 Hamilton Ave, Suite 9B
White Plains, NY 10601

FAX credit card orders to 914-946-1336

For Office Use Only:	
Date Rec'd	<input type="text"/>
Payment 1	<input type="text"/>
Payment 2	<input type="text"/>
QB <input type="text"/>	L <input type="text"/>
CC <input type="text"/>	Conf <input type="text"/>

Website