

STAGECOACH THEATRE SCHOOL

2014/2015 REGISTRATION FORM

Student's Name: _____

Parent's Name(s): _____

Address: _____

Home Phone: _____

Cell Phone: _____

Email: _____

Birthdate: _____

Age: _____

Gender: _____

MSP/Medical #: _____

Doctor's Name & #: _____

Emergency Contact Info: _____

If answering yes to the following questions please explain on the back of this sheet.

Does your child have any medical conditions or allergies we should be aware of? Y or N

Is your child on any medications? (ie: insulin, etc.) Y or N

Are there any custody arrangements we need to be aware of? Y or N

Please Register my child for:

Registration Checklist:

Theatre Seekers (5-6)	\$350.00		Contact Info	
Intermediate Theatre (7-10)	\$390.00		Care Card Number	
Improv (11+)	\$390.00		Consent Form	
Onstage Theatre (11+)	\$985.00		Code of Conduct Contract	
Explorations in Multimedia	\$495.00		Tuition Policy	

Tutions fees are NON-REFUNDABLE after October 15, 2014. This is the final deadline for class withdrawl.

Office Use Only

Multi Family		Date Received	
Rising Star Grant		Add to Waitlist	
Monthly Payment Plan/Admin Fee		Invoice Prepared #	