

# LoMastro Performing Arts Academy

## BROADWAY CONNECTION 2009-2010 REGISTRATION FORM

STUDENT'S NAME (ONE PER FORM) \_\_\_\_\_ DATE OF BIRTH (M/D/Y) \_\_\_\_\_ SCHOOL / GRADE 09-10 \_\_\_\_\_

**NEW STUDENTS ONLY**

ADDRESS \_\_\_\_\_ CITY / STATE / ZIP CODE \_\_\_\_\_ PARENT EMAIL \_\_\_\_\_

HOME PHONE # \_\_\_\_\_ PARENT CELL PHONE # \_\_\_\_\_ PARENT'S NAMES \_\_\_\_\_

MEDICAL CONDITIONS / ALLERGIES \_\_\_\_\_ EMERGENCY CONTACT NAME / PHONE # / RELATION \_\_\_\_\_

\*HOW DID YOU HEAR ABOUT LPAA?(CIRCLE 1) WEBSITE POSTCARD MAIL E-MAIL REFERRED BY \_\_\_\_\_

Sunday, November 22	<b>Young Frankenstein</b> Musical Theatre Jazz Master Class	<input type="checkbox"/> INTERMEDIATE: 9 – 10:30am (ages 9-12) <input type="checkbox"/> ADVANCED: 10:30 – 12pm (ages 12 & up)	\$35
Monday, December 21	<b>In The Heights</b> Triple Threat Audition Technique Workshop	<input type="checkbox"/> INTERMEDIATE: 9 – 12pm (ages 9-12) <input type="checkbox"/> ADVANCED: 1 – 4pm (ages 12 & up)	\$65
Sunday, January 24	<b>Dreamgirls</b> Musical Theatre Jazz Master Class	<input type="checkbox"/> INTERMEDIATE: 9 – 10:30am (ages 9-12) <input type="checkbox"/> ADVANCED: 10:30 – 12pm (ages 12 & up)	\$35
Sunday, February 28	<b>101 Dalmatians</b> Triple Threat Audition Technique Workshop	<input type="checkbox"/> INTERMEDIATE: 9 – 11am (ages 9-12)	\$45

**Attire** Hair must be worn in a bun or ponytail. Girls: leotard, tights, jazz shoes, shorts or capri may be worn. Boys: t-shirt, sweat pants or shorts, jazz shoes. Students not dressed and/or groomed appropriately may be asked to observe.

**Waiver**

I/We, \_\_\_\_\_ [insert name of student] on our own behalf, hereby release LoMastro Performing Arts Academy, Inc., its Agents, affiliates, assigns and employees from any and all actions, causes, causes of action, suits, damages, claims and liability whatsoever, at law or in equity which I/We may have with respect to personal injury, illness, or property damage or any other damage that may be incurred, occurring on or off the school's premises. I understand there are no refunds. I understand the faculty is subject to change. I certify that I am in good health and capable of participating in all school activities and classes. I have consulted a physician to determine the risks if any in participating in said activities and accept said risks freely and voluntarily. I hereby give permission to LoMastro Performing Arts Academy to take photographs for promotional uses for the school and waive all right, title or claim to said photographs as well as any claims that may arise out of the use of said photographs.

Parent/Guardian Signature \_\_\_\_\_ Date \_\_\_\_\_

Tuition \$ \_\_\_\_\_

3% Processing fee if paid by credit card \$ \_\_\_\_\_

Total Due \$ \_\_\_\_\_

You may pay by:  Visa  MC  Check

Card number \_\_\_\_\_ Exp. date \_\_\_\_\_

Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_

**OFFICE USE:**  CASH  CREDIT  CHECK \_\_\_\_\_

- ★ Pre-Registration is Required.
- ★ Placement is determined by age as of 9/1/09
- ★ Full Payment must accompany this form to be processed.

**Mail to: 2515 Waukegan Rd, Bannockburn, IL 60015**

**Fax to: 847-945-2516**