

MUSICAL THEATRE CLASS REGISTRATION FORM

Student Name		Age	Grade	-
Address				-
City	State		_Zip	-
Home Phone		_ Cell Phone		_
Parent Name				-
Parent Email				,
	Class dates	and times:		
Mondays September 25, Octobe Performa		onday, December 4 at 7:0	•	i0pm
Policies and Procedures	raition	. 9103		
Please make checks payable to PA 15037	MON RIVER ARTS. If m	nailing a check send to: Mor	n River Arts 206 Plum	Street Elizabeth,
2) Class size is limited. Payment is3) Classes will take place at the st4) No tuition refunds will be gran	udio on Plum Street. Yo ted after the first class.	ou will be given a schedule t	the first day of class.	
5) We reserve the right to cancel6) Please call Mon River Arts at 4:7) Please try to arrive 15 minutes	12-405-8425 if you kno	w your child will be absent	=	d.
8) Participants should wear comfortoe shoes (no flip flops or sand9) Student Cell phones must be o	als). Also please note t	hat chewing gum is not allo	•	
10) Please contact Lori Kolodziej, E If using a credit card to hold your sp	xecutive Director with	questions regarding theatre	e classes at 412-405-	8425.
Credit Card (circle one):	Visa MC AME	EX DISCOVER		
Card #		CVV Code	_	
Office Use Only				
Payment amount	Date Received	Check #		