

2010 Young Actors Conservatory Registration Form

STUDENT NAME: _____

PARENT/GUARDIAN NAME: _____

STUDENT AGE (AS OF JUNE 2010): _____ GRADE (AS OF FALL 2010): _____

SCHOOL (AS OF FALL 2010): _____

MAILING ADDRESS: _____

HOME PHONE: _____

PARENT PHONE: _____

STUDENT EMAIL: _____

PARENT EMAIL: _____

APPLYING TO:

___ MIDDLE SCHOOL PROGRAM JUNE 21-JULY 9, 2010

MIDDLE SCHOOL REGISTRATION DUE APRIL 30, 2010

___ HIGH SCHOOL PROGRAM JULY 12-AUGUST 6, 2010

HIGH SCHOOL AUDITION REGISTRATION DUE APRIL 2, 2010

HIGH SCHOOL PREFERRED AUDITION DATE (check one)

___ April 10 (9:00-12:00) ___ April 12 (5:00-7:00)

Submit Registration Form, Headshot, Teacher Letter of Support, and Personal Statement to:

Director of Education
Stages Repertory Theatre
3201 Allen Parkway, suite 101
Houston, TX 77019
Fax: 713-527-8669

or

Email: awillerson@stagestheatre.com or elaporte@stagestheatre.com

Parent or Guardian: My signature below indicates my understanding of the commitment required if my child is admitted to the Young Actors Conservatory. I understand that my child must be available to attend every day of class (except in case of illness). I understand that admittance to the High School program is by audition only and that there is no guarantee my child will be accepted into the High School program.

Parent/Guardian signature

Date