

STUDENT INFORMATION

(Please Print)

FIRST NAME	LAST NAME	DoB / /	AGE	M	F
SCHOOL		GRADE			

Race/Ethnicity (optional, requested for grants and donation information)

- | | | |
|---|---|--|
| <input type="checkbox"/> ALASKA NATIVE | <input type="checkbox"/> HISPANIC/LATINX | <input type="checkbox"/> TWO OR MORE RACES |
| <input type="checkbox"/> AMERICAN INDIAN | <input type="checkbox"/> HAWAII NATIVE | <input type="checkbox"/> OTHER (Please Specify): |
| <input type="checkbox"/> ASIAN | <input type="checkbox"/> PACIFIC ISLANDER | _____ |
| <input type="checkbox"/> BLACK/AFRICAN AMERICAN | <input type="checkbox"/> WHITE | _____ |

PARENT/GUARDIAN

Name _____

Street Address/Apt# _____

City _____

State/Zip _____

Home Phone _____

Cell Phone _____

Work Phone _____

Email _____

Financial Aid for Children's Classes Requested.

(831) 622-0700

sodapacrep@gmail.com

Complete this form and return to SoDA with payment

Classes and class times are subject to change.

**Peppy Garner & Darnell Whitt
School of Dramatic Arts
PO Box 222035
Carmel, CA 93922**

Method of payment

CHECK/CASH Payable to PACREP MC/VISA AMEX

Credit Card Number

Name on Credit Card

Exp.Date

Emergency Contact Name

Relationship

Best Phone

I understand that in the event of an emergency PRT/SoDA will make every effort to reach me but if that is not possible, they may have my permission to seek appropriate medical care through Community Hospital of the Monterey Peninsula. I understand that Pacific Repertory Theatre and SoDA will not be held responsible for any medical expenses for me or my child.

Parent / Guardian Signature

Standards of Student Behavior Please read and sign this agreement.

I understand and agree to behave in a respectful manner towards all SoDA instructors, students, materials, and locations at all times. My right to attend class(es) can be revoked should I not adhere to a proper behavior code. Student Signature _____ Date _____

Photo/Video Release For valuable consideration received, I hereby grant SoDA and its legal representatives and assigns, the irrevocable and unrestricted right to use and publish photographs/videos of my child in class at SoDA, for editorial trade, advertising and any other purpose and in any manner and medium; and to alter the same without restriction. I hereby release SoDA of its legal representatives and assigns from all claims and liability relating to said photographs/videos.

Parent/Guardian Signature _____ Date _____

Classes for Children and Young People :

Musical Theatre Mster Class	(5 - 12 grade) Sat	11:00A -12:55P	9/21 - 12/14	\$295
Sat Acad - Intro to Theatre	(1 - 4 grade) Sat	10:00A -10:55A	9/21 - 12/14	\$150
Sat Academy	(5 - 12 grade) Sat	1:00P - 4:00P	9/21 - 12/14	\$345
Showstoppers!	(2 - 4 grade) Mon	3:30P - 5:00P	9/23 - 12/9	\$265
Mommy and Me Music	(ages 1 - 4) Tue	4:00P - 4:45P	9/24 - 12/10	\$150
Tiny Tots Musical Theatre	(ages 4 - 6) Wed	4:00P - 5:00P	9/25 - 12/18	\$150
Beginning Puppetry	(2 - 8 grade) Thu	4:00P - 5:30P	9/26 - 12/19	\$225
Add \$20 Registration Fee (Once per semester, per student)				
Make a Tax Deductible Donation				

The School of Dramatic Arts (SoDA) is a program of Pacific Repertory Theatre, a non-profit organization. Through your generous donations, the show goes on. **Please Donate Today!**