



Feller Academy Spring Classes

Name _____ M/F _____ Age _____ Birth Date _____

School _____ 17/18 School Grade _____

Parent/Guardian _____

Address _____ City/State/Zip _____

Home Phone _____ Work Phone _____ Cell Phone _____

Email _____

Emergency Contact (Other Than Parent) _____

Home Phone _____ Work Phone _____ Cell Phone _____

Payment (circle) **CHECK – VISA – MC – DISCOVER—WEBSITE**

Card Number # _____ Exp. Date _____

Name on Card _____

Authorized Signature _____

Please Select One:

- Bear Necessities (\$150)** Ages 6-8 | Tues. 1/23-3/6 | 6:00 PM – 7:00 PM
- Little Wonders (\$150)** Ages 9-11 | Thurs. 1/25-3/8 | 6:00 PM – 7:00 PM
- Almost There (\$150)** Ages 11-14 | Tues. 1/23-3/6 | 6:00 PM – 7:00 PM
- One Jump Ahead (\$150)** Ages 9-14 | Thurs. 1/25-3/8 | 6:00 PM – 7:00 PM
- Homeschool 1 (\$100)** Ages 6-11 | Mon. 1/15-2/21 | 1:00PM—2:00PM
- Homeschool 2 (\$100)** Ages 11 and Up | Wed. 1/17-2/21 | 1:00PM—2:00PM

Enrollment Fee: _____

TOTAL AMOUNT ENCLOSED: _____

Please Circle One:

Does your student have any allergies? Y N

If so please list

Does your student require any special learning requirements? Y N

If so please

explain_____

Photo opt out: I DO NOT want pictures or videos of my student(s) used for current or future web print promotions.

I/We release the Henegar Center and its representatives from and in connection with any claim brought by anyone arising out my child(ren) attending the Feller Theatre Academy program.

I/We further give permission for any medical treatment deemed necessary while said children are under the care of the Henegar Center and its representatives as a participant.

If participant is under 18 years of age, please complete the following:

Insurance

Co:_____ Policy:_____

Policy Holder Name and

Number_____

Guardian

Signature_____ Date_____