

New Hampshire Academy of Performing Arts
 2017 Pre-Company Summer Intensive
Ages 10-13 or by Special Recommendation
Must be Level II or above

Name:		Birth Date:		Age (as of 6/1/17):	
Parent Name:					
Mailing Address:					
City:		State:		Zip:	
Email:			Phone:		

Pre-Company Summer Intensive

Monday, June 19 – Thursday, June 22, 4:15 – 6:45 pm
 Thursdays, July 13, July 20, July 27 & August 3, 4:15 – 6:45 pm
Class day includes three 45 minute classes and a 15 minute break.

Tuition

Full Program: \$325.00*
Sign up on or before April 15 and receive a 10% discount!

Total Due: _____

**Tuition when paying with cash or check. Please add an additional \$5 for credit or debit payment.*

Class schedule/instructor subject to change. All classes require a minimum number of students and will be cancelled if minimum is not met. Payments for Summer Programs are non-refundable. To pay by credit card, circle card type and then, please complete the following information. Otherwise, please include a check to NHAPA for total amount.

Credit Card Type (Circle one): MC VISA DISCOVER
 Card# _____ Exp. _____
 Name on Card _____
 Security Code _____ Zip Code _____

ADMISSION: I the undersigned, (Parent or Guardian of the above student) release NHAPA, including instructors from any and all injuries which student may sustain while training, performing or during any activity. I also agree that I am responsible for health insurance and any medical cost due to injury. I also give permission for emergency medical transportation and treatment, at my expense, if the need arises.

Parent Signature: _____ Date: _____
 Print Name: _____