

# New Hampshire Academy of Performing Arts

## 2010 Fall Session Programming

Name: \_\_\_\_\_ Birth Date: \_\_\_\_\_ Age: \_\_\_\_\_  
 Parents Name: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_  
 E-Mail (Home/School Communication): \_\_\_\_\_

**Please check which program you wish to register for:**

<b>6 Week Sessions*</b> (Dates: 9/22/10 ,9/29/10 ,10/6/10 ,10/13/10 ,10/20/10 , 10/27/10)		
Program	Day/Time	Cost
___ Boogie Babies (2-3 yrs w/Parent)	Wed, 10:30-11:15am	<u>\$75.00</u>
<b>8 Week Sessions*</b> (Dates: 10/18/10, 10/25/10, 11/1/10, 11/8/10, 11/15/10, 11/22/10, 11/29/10, 12/6/10)		
Program	Day/Time	Cost
___ Tap/ Hip Hop Basics (6-8 yrs)	Mon, 4:15-5:15pm	<u>\$135.00</u>
___ Hip Hop/Dance Fundamentals (7-9 yrs)	Friday, 4:00-5:00pm	<u>\$135.00</u>
<b>12 Week Sessions*</b> (Dates: 9/22/10 ,9/29/10 ,10/6/10 ,10/13/10 ,10/20/10 , 10/27/10, 11/3/10, 11/10/10, 11/17/10, 12/1/10, 12/8/10, 12/15/10)		
Program & Dates	Day/Time	Cost
___ Tiny Dancers (3-4 yrs)	Wed, 11:15-12:00pm	<u>\$150.00</u>
___ Show Stoppers (5-7 yrs)	Wed, 3:15-4:00pm	<u>\$150.00</u>

\*Class schedule/instructor subject to change. All classes require a minimum and will be cancelled if not met. Pricing is valid through 12/31/10 and payments for programs are non-refundable.

To pay by credit card (MC, Visa, Discover), please complete the following information. Otherwise, please include a check to NHAPA for total amount.

Card# \_\_\_\_\_ Exp. \_\_\_\_\_  
 Name on Card: \_\_\_\_\_ Security Code \_\_\_\_\_ Zip: \_\_\_\_\_  
 Cardholder's Signature \_\_\_\_\_

**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.

**Student Signature (18 and over):** \_\_\_\_\_ Date: \_\_\_\_\_

**Parent Signature:** \_\_\_\_\_ Date: \_\_\_\_\_