

## **SUMMER INTENSIVE WORKSHOP**

## **THE ACADEMY of** Gregory Hancock Dance Theatre

(Academy office) Paid\_\_\_\_\_

(Academy office) Date\_\_\_\_\_

## **SUMMER REGISTRATION FORM 2016**

Student's Name		Date of Birth	Age
Address		Home Phone (	)
City	State	Zip Code	
Father/Guardian's Name		Cell Phone (	)
Place of Employment		Work Phone (	)
Email			
Mother /Guardian's Name		Cell Phone (	)
Place of Employment		Work Phone (	)
Email			
Emergency Contact	Phone ( )	Relationship to	Student
Please choose between 1 or 2 wee 1 week tuit WEEK 1 – JULY 11 – 15 Elementary & Intermediate Levels WEEK 2 – JULY 18 – 22 Intermediate & Advanced Levels WEEK 3 – JULY 25 – 29 Advanced Level		ing dancer's name reek tuition is \$500	D
One (1) WEEK OPTION \$275			
Two (2) WEEK OPTION \$500 Please include a AGHDT Liability W	Vaiver (available of	Academy webpage)	with Registration Form
		TENSIVE WORKSH r, Carmel, IN 4603	
All students not enrolled a	•	• •	