

Impact Creative Arts Academy

2019 – 2020 Registration Form

Student's Name (print): _____
(First) (Last Name)

Date of Birth: _____ School & Grade _____

Address (including zip code): _____

Home Phone: _____ Cell Phone: _____

Email Address: _____
(please print clearly)

Parent/Guardian's Name (print): _____
(First) (Last Name)

NEW STUDENTS: Previous Training? Please list past experience in dance, acting, music (include styles of dance and number of years)

REGISTERING FOR:

DANCE

Ballet/Tap (3-4) _____ Beg. Ballet/Tap _____ Level 1 / 2 Tap _____ Level 3/4 Tap _____ Adult Tap _____

Jazz I _____ Jazz II _____ Jazz III _____ Ballet I _____ Ballet II _____ Ballet III _____ Leaps/Turns _____

Beg Hip Hop _____ Int. Hip Hop _____ Adv. Hip Hop _____ Adult Hip Hop _____ Boys H.H. (8-10) _____

Boys HH (Age 11+) _____ Contemp. 1 _____ Contemp. 2 _____ Lyrical 3 _____ Jazz/Acro _____

Jazz/Hip Hop (Age 4-6) _____ Ballet/Tap (4-5 yr old) _____ Ballet/Creative Movement (2-3yrs) _____

ACTING / ART

Acting (5-8) _____ Acting (9-12) Wed. 5:00-6:30 _____ Teen Acting _____

Teen Acting _____ Adult Acting _____ Homeschool Acting _____

Musical Theatre (8-12) _____ Teen Show Choir _____

Tues. Art (K-2nd) _____ Tues. Art (3rd-5th) _____ Thurs. Art (3rd-5th) _____

PRIVATE LESSONS / MUSIC

Piano _____ Voice _____ Violin _____ Guitar _____