



STUDENT REGISTRATION (SPRING 2019)

Please fill out this form completely, then submit it to Commonwealth Theatre Center via mail, fax or email.
 Mail: 1123 Payne St., Louisville, KY 40204 / Fax (502) 589-0225 / Email: enroll@commonwealththeatre.org

If your child is 13+, or has previous acting experience, please call Charlie Sexton, Artistic Director, for proper placement: {502} 589-0084 x301.

Choose the applicable Conservatory class level (class venue: Commonwealth Theatre Center, 1123 Payne St, Louisville, KY 40204)

<u>BEGINNING:</u>	<u>INTERMEDIATE:</u>	<u>ADVANCED:</u>
Imagination (ages 5-8)	<input type="checkbox"/> Studio	<input type="checkbox"/> Performance 1
<input type="checkbox"/> Saturday session		
<input type="checkbox"/> Monday session	<input type="checkbox"/> Apprentice	<input type="checkbox"/> Performance 2
Improv (ages 9-12)		
<input type="checkbox"/> Saturday session	<input type="checkbox"/> Playmaking 1	<input type="checkbox"/> Playmaking 2
<input type="checkbox"/> Monday session		

Choose the applicable Conservatory class level (class venue: Americana Community Center, 4801 Southside Dr, Louisville, KY 40214)

BEGINNING :

Improv (ages 9-12)

Friday session

STUDENT'S INFORMATION		
Name:		
Date of birth:	Age:	Gender (M/F):
<i>Student's address - Street :</i>		
City:	State:	ZIP Code:
Race: White <input type="checkbox"/> African-American <input type="checkbox"/> Asian-American <input type="checkbox"/> Hispanic <input type="checkbox"/> Other <input type="checkbox"/>		
School:	Grade:	Email:
Special Needs/ Medical Issues:		
MOTHER'S INFORMATION		
Name:		
<i>Current address (if different than student's) - Street:</i>		
City:	State:	Zip Code:
Home Phone:	Cell Phone:	Work Phone:
Email (Required):		
Place of Business:	Title:	
Community Affiliations (i.e., PTA, Volunteerism, Memberships):		

FATHER'S INFORMATION		
Name:		
Current address (if different than student's) - Street:		
City:	State:	Zip Code:
Home Phone:	Cell Phone:	Work Phone:
Email (Required):		
Place of Business:	Title:	
Community Affiliations (i.e., PTA, Volunteerism, Memberships):		

EMERGENCY CONTACT INFORMATION	
Name of Emergency Contact (non-parent):	
Relationship to student:	Phone:
FRIENDS, RELATIVES, ETC. WHO MIGHT LIKE TO RECEIVE OUR EMAILS AND/OR NEWSLETTER (we will ask for their permission):	
Name:	
Email address:	Relationship to student:
Name:	
Email address:	Relationship to student:

How did you learn about Commonwealth Theatre Center and Walden Theatre Conservatory? (circle all that apply)
TV/Radio Newspaper/Magazine Fair/Booth Social Media Outdoor/Signage Friend School

PAYMENT INFORMATION

Indicate desired payment plan – first payment in both plans due upon registration (see tuition fee schedule for cost associated with each class level):

- One payment (upfront)
 Four equal payments

Indicate method of payment:

- CHECK (payable to "Commonwealth Theatre Center")
 ACH (automatic withdrawal from checking account) *A voided check and signature of account holder MUST BE SUBMITTED EACH SEMESTER. ACH payments will be withdrawn on the 1st of the month.*
 CREDIT CARD *Please present your card in the Business Office (NO over-the-phone/written numbers)*
 ONLINE PAYMENT via Intuit Quickbooks

SIGNATURE OF PERSON RESPONSIBLE FOR TUITION PAYMENT (REQUIRED): DATE:

PHOTO/VIDEO RELEASE: *Your signature above gives your consent and authorization to use and reproduce any and all photographs and/or video footage taken of your child, by Commonwealth Theatre or its agents(s), for any purpose, without compensation to me. All negatives & prints are Commonwealth Theatre property.*

VOLUNTEER INFORMATION

As a non-profit organization, Commonwealth Theatre depends on volunteers to fulfill its mission, and invites its extended family to participate in volunteer activities throughout the year. *I am interested in helping out with the following (check all that apply):*

Box Office __ Special Events __ Fundraising __ Clerical Assistance __ Marketing/Posters __
 Creative (photography, graphic design, sets, costumes, etc.) __ Parent Engagement Committee __

Other ideas & interests: _____

PLEASE DETATCH THIS SHEET & KEEP FOR YOUR RECORDS

Class Level: IMAGINATION (Monday Session 4:30-6:30pm, 1st class meets 1/7/2019) - venue: CTC
(Saturday Session 9:30-11:30am, 1st class meets 1/12/2019) - venue: CTC**

<u>Payment Plans</u>	<u>1st day of class</u>	<u>Payment Amounts By Due Date:</u>			<u>Total</u>
		<u>2/1/2019</u>	<u>3/1/2019</u>	<u>4/1/2019</u>	
1 Payment (UPFRONT)	\$350.00	-	-	-	\$350.00
4 Equal Payments	\$97.50	\$97.50	\$97.50	\$97.50	\$390.00

Class Level: IMPROV (Monday Session 4:30-6:30pm, 1st class meets 1/7/2019) - venue CTC
(Saturday Session 10am-12pm, 1st class meets 1/12/2019) - venue: CTC*
(Friday Session 4:30-6:30pm, 1st class meets 1/18/2019) - venue: ACC***

<u>Payment Plans</u>	<u>1st day of class</u>	<u>Payment Amounts By Due Date:</u>			<u>Total</u>
		<u>2/1/2019</u>	<u>3/1/2019</u>	<u>4/1/2019</u>	
1 Payment (UPFRONT)	\$445.00	-	-	-	\$445.00
4 Equal Payments	\$123.00	\$123.00	\$123.00	\$123.00	\$492.00

Class Level: STUDIO (Wednesdays & Fridays 4:30pm-6:30pm, 1st class meets 1/9/2019)

<u>Payment Plans</u>	<u>1st day of class</u>	<u>Payment Amounts By Due Date:</u>			<u>Total</u>
		<u>2/1/2019</u>	<u>3/1/2019</u>	<u>4/1/2019</u>	
1 Payment (UPFRONT)	\$635.00	-	-	-	\$635.00
4 Equal Payments	\$179.00	\$179.00	\$179.00	\$179.00	\$716.00

Class Level: APPRENTICE (Wednesdays & Fridays 4:30pm-6:30pm, 1st class meets 1/9/2019)

<u>Payment Plans</u>	<u>1st day of class</u>	<u>Payment Amounts By Due Date:</u>			<u>Total</u>
		<u>2/1/2019</u>	<u>3/1/2019</u>	<u>4/1/2019</u>	
1 Payment (UPFRONT)	\$695.00	-	-	-	\$695.00
4 Equal Payments	\$194.00	\$194.00	\$194.00	\$194.00	\$776.00

Class Level: PLAYMAKING 1 (Tuesdays & Thursdays, 4-6pm, 1st class meets 1/8/2019)

<u>Payment Plans</u>	<u>1st day of class</u>	<u>Payment Amounts By Due Date:</u>			<u>Total</u>
		<u>2/1/2019</u>	<u>3/1/2019</u>	<u>4/1/2019</u>	
1 Payment (UPFRONT)	\$750.00	-	-	-	\$750.00
4 Equal Payments	\$200.00	\$200.00	\$200.00	\$200.00	\$800.00

*Class Level: ADVANCED Includes: PLAYMAKING 2, PERFORMANCE 1 & 2
(Tuesdays & Thursdays, 4-6pm, 1st class meets 1/8/2019)*

<u>Payment Plans</u>	<u>1st day of class</u>	<u>Payment Amounts By Due Date:</u>			<u>Total</u>
		<u>2/1/2019</u>	<u>3/1/2019</u>	<u>4/1/2019</u>	
1 Payment (UPFRONT)	\$800.00	-	-	-	\$800.00
4 Equal Payments	\$219.00	\$219.00	\$219.00	\$219.00	\$876.00

Venues:

- CTC (Commonwealth Theatre Center), 1123 Payne St, Louisville, KY 40204
- ACC (Americana Community Center), 4801 Southside Dr, Louisville, KY 402014

Please Note:

- Multi-Child Discount: Highest tuition level is full price, 25% off tuition for additional children in household
- If you do not choose a payment plan, you will incur tuition cost at the 4-payment level.

Please see Student & Guardian Handbook for other important information, fees and dates.