



**Miss Kathey's Academy Registration Form**

Name \_\_\_\_\_

Email \_\_\_\_\_

Phone \_\_\_\_\_ Age \_\_\_\_\_

DOB: \_\_\_\_\_

Circle: Male Female

Height: \_\_\_\_\_ Weight: \_\_\_\_\_

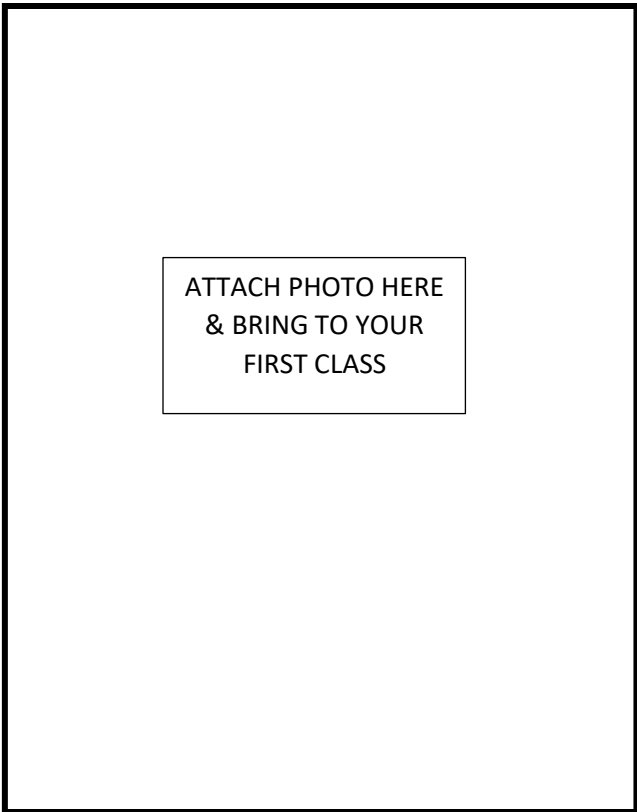
Have you ever been in a MKA Show before? Yes No

Kidz (ages 5 -9)  Tweenz (5 – 12)

Girlz (13 – 21)  Boyz (13 and up)

Young Adult Group (18 and up)

Other Theatrical Experience & Talents (Tap, Ballet, Gymnastics, etc.)



Parent Name \_\_\_\_\_ Parent Cell \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Parent Email \_\_\_\_\_

I will be responsible to make sure he/she attends every performance and every rehearsal for which he/she is scheduled. In case of illness, I will notify MKA Coordinator in advance. In order to guarantee the superiority of rehearsals and the production, I understand that two or more absences may result in dismissal from the show. I understand that students are NOT eligible for a tuition refund. I am responsible for personal items (i.e., shoes, tights, make-up). I understand that I will be required to attend two parent meetings, sell 10 tickets per child to performances, to place one ad in the Souvenir Program book and to volunteer as part of a parent committee.

\_\_\_\_\_ I have read the above statement and by writing my initials I am in agreement with the statement.

**Parents, please indicate your 1<sup>st</sup>, 2<sup>nd</sup>, and 3<sup>rd</sup> choice of Parent Committees in the spaces below:**

\_\_\_\_\_ Backstage \_\_\_\_\_ Public Relations \_\_\_\_\_ Sets \_\_\_\_\_ House Manager \_\_\_\_\_ Props

\_\_\_\_\_ Costumes \_\_\_\_\_ Make-up \_\_\_\_\_ Technical