



**PRIVATE ACTING LESSONS (ONGOING)  
REGISTRATION FORM**

**CONTACT INFORMATION**

Date	Parent (s) Name (s) (if applicable):
Student Name	Telephone – H
Student Birth date	Telephone - C
Student Grade (if app)	Telephone - W
Address	*please indicate the best
City, State, Zip	number to contact you.
E-mail Address	
How you heard about Verve Studios?	

**LESSON INFORMATION**

Lesson length preference

30 minutes \* recommended for ages 5-9  
 45 minutes \* recommended for ages 9-teen  
 60 minutes \* recommended for ages 14-adult; the serious student

Day preference

Monday\*     Tuesday     Wednesday\*     Thursday     Friday\*

\*currently slots open on these days.

Time Preference     11 am-2 pm     2 pm-4 pm     4 pm-7 pm

Please note if specific Day \_\_\_\_\_, Time \_\_\_\_\_ and start date \_\_\_\_\_ was discussed with Studio.

**PREVIOUS ACTING INFORMATION**

Please describe any previous acting lesson experience. Include teachers, methods studied and length OR please attach a headshot and/or resume if you have one.

**POLICIES**

The one-time Studio registration fee of \$25 is due at the time of enrollment and should accompany this form. It is refundable only up to 48-Hours prior to the first session. Appointment will be confirmed upon receipt of this form and registration fee. The full first month's tuition is due at the first lesson or the first of the month; an invoice will be provided with the confirmation of the appointment. Full Payment Policies will be provided at or before the first session.

Adult – Signature \_\_\_\_\_

Date \_\_\_\_\_

Verve Studios Use only:

Received	Entered	Conf Receipt/Appt	Welcome Packet	Payment \$ Date Type	Lesson time	Student ID	Rev 3-81409
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