

PENNY TEMPLETON STUDIO

344 West 38th Street Suite 204

New York, NY 10018

(212) 643 2614 pts158@pennytempletonstudio.com

Teen Class Registration Form

Last Name: _____ First Name: _____

Stage Name: _____ Referred by: _____

Cell: _____ Home Phone: _____ Work: _____

E Mail Address: _____

Alternate email : _____

Address: _____

City: _____ State: _____ Zip: _____

Signature: _____ Date: _____

Please Read Carefully

I am aware that the craft of acting may place unusual physical and emotional stress and carries a potential risk of injury. I assume that risk and agree that the Penny Templeton Studio and its instructors shall not be liable in anyway for injuries sustained while attending class or studio functions. It is also understood that acting instruction and scene work may include physical contact by the instructor or scene partner as part of rehearsal and/or regular class work. *I am aware that there is a solid, unpadded concrete floor under the carpeting.* My signature on this document indemnifies the studio and its instructors and holds them harmless from any claims, damages and or judgment by me including the costs of defense and reasonable attorney's fees resulting in whole or in part from the acts and/or omissions of said student in connection with use of Penny Templeton Studio and its programs and from any injuries to persons or property of the same regardless of causation. I also understand that the studio is not responsible for lost or stolen property.

Payments & Refunds

All class Fees are due 7 days prior to starting a class unless prior arrangements have been made with Hank. All cancelations must be submitted in writing (email acceptable no less than 7 days prior to the start of the new month. Cancelations made after the 7 day period are subject to a 50% penalty. *All class payments are nonrefundable.* Classes that are missed because of professional bookings or auditions may be made up in another class with in 4 months of the missed class. *The one month deposit for on-going classes is nonrefundable and must be used as payment for the final month of the on-going class.*

Signature _____ Date : ____/____/____

Parent or Guardian

Signature _____ Date : ____/____/____

Print Name _____