

MY DOG ATE PEANUT BUTTER
Improv Class Registration Form

CLASS SIZE IS LIMITED
One Student Per Form
Return Form To Ensure Your Place



(Please Print)

Student 's Name: _____

Student's Age: _____

Legal Guardian's Name: (If Under 18) _____

Email Address: _____

Phone: _____

Number of years acting / modeling experience (If any): _____

Improv Experience: _____

____ Yes, I Would Be Interested in MDAP Apparel.

PHOTO RELEASE CONSENT

_____ (Initial) I allow the event organizers to film and/or take photos of my likeness to be used for advertisement and social media content.

Signature: _____ **Date:** _____

Class Location: _____

Screen Shoot Completed Form & Email To: kevindraines@gmail.com

