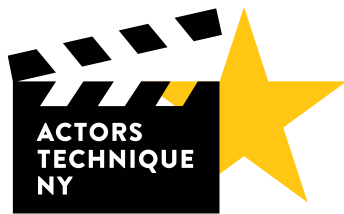


SPRING
2020



TV/FILM ACT & AUDITION

917.763.1777 • ActorsTechniqueNY.com

SATURDAYS
April 18th — June 5th

OR

SUNDAYS
April 19th — June 6th

+ **TUESDAYS**, April 21st — June 8th (all ages)

NO CLASSES MEMORIAL DAY WEEKEND

7-WEEK TV/FILM INTENSIVES

SATURDAY AND SUNDAY PROGRAMMING SCHEDULE:

	11:00 AM TO 12:30 PM	12:30 TO 1:30 PM	1:30 TO 3:00 PM	3:00 TO 4:00 PM
KIDS 7 TO 10	On Camera Naturalism/Realism Level 1 & Advanced	Electives (all ages) •Nick/Disney Comedy •Hip Hop Perform •Vocals	Improvisation 100% Fun	One-Act Scenes — OR — Sketch Comedy (all ages) Final Performance
TWEENS/ TEENS 11 TO 18	Improvisation 100% Fun		Multi-camera Scene Performance Level 1 & Advanced	

Classes separated by age, skill/maturity level

SPRING REGISTRATION – 1 Class, 2 Classes, Full-Day Intensive

7-WEEK SPRING PROGRAM

FULL DAY INTENSIVE*	3 Core Classes/day (21 classes + Showcase, \$59/class)	\$1295
1 CORE CLASS	(6 classes + Showcase, \$71/class)	\$495
ELECTIVES (all ages)	Nick & Disney Comedy/Hip Hop Dance/Vocals	\$395
TV TOTS	(6 classes + Showcase, \$55/class)	\$395

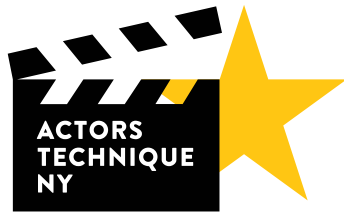
*Does not include electives

ATNY'S YOUTH MEMBERSHIP DISCOUNT

Just \$145. Save 10% immediately, then continue to save for the calendar year. Membership is included with full day intensive registration. 10% Sibling Discounts. PLUS \$50 off for every NEW FACE registration **referred by you.**

Private Coaching & Audition Tapings by Appointment: 917.763.1777

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2020



TV/FILM ACT & AUDITION

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R E G I S T R A T I O N F O R M

GENERAL INFORMATION

ACTOR NAME _____ DATE OF BIRTH _____

REPRESENTATION _____ REFERRED BY _____

GUARDIAN NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ EMAIL _____

CLASS SELECTION

7-WEEK SPRING PROGRAM

SATURDAYS

April 18th —
June 5th

SUNDAYS

April 19th —
June 6th

FULL-DAY INTENSIVE	INDIVIDUAL CLASSES				
	ON CAMERA/ MULTICAMERA†	IMPROVISATION	ONE-ACT SCENES OR SKETCH COMEDY	ELECTIVES	TV TOTS
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
DAY PREFERENCE	SATURDAY	SUNDAY			

† Option is age-dependent

PAYMENT INFORMATION

MC VISA AMEX

AMT CHARGED TODAY: \$

NAME ON CARD _____

CARD NO. _____ EXP _____ CCV _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

<input type="checkbox"/> DEPOSIT	<input type="checkbox"/> PAID IN FULL
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NOTES: I authorize Actors Technique, NY to charge my credit/debit card for 'Total Due' amount in full and/or pursuant to payment plan listed above, until paid in full, regardless of my attendance. If payment plan ATNY may charge me every 10 - 14 days until payment is satisfied in full, without permission or exception and regardless of attendance. I understand that I am not entitled to financial refunds for any reason. I am the parent or legal guardian of the actor(s) above and/or authorized person on behalf of Parent to give billing permission to ATNY for these services and have read and understand this paragraph in full.

AUTHORIZED SIGNATURE

DATE