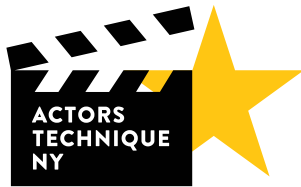


WINTER
2022



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CONGRATULATIONS
ATNY Booking!

VIOLET
Chicago PD (NBC)



There's no better training for a young actor to receive than from **Actors Technique NY**. Now in its 19th year, ATNY develops craft, technique, confidence and professionalism, all necessary for success. Countless students have begun and furthered their careers at ATNY with agent representation and TV/Film bookings. ATNY brings top bi-coastal TV/Film agents & managers to view it's talent at NO ADDITIONAL COST, in it's final week. This is available to all 9-week students.

9-WEEK INTENSIVES OR 6-WEEK HONING PROGRAMS

FREE OPTIONAL INDUSTRY SHOWCASE FOR 9-WEEK INTENSIVE



SATURDAYS

January 29th – March 26th



SUNDAYS

January 30th – March 27th

KIDS

11:00 AM TO 12:20 PM	12:30 TO 1:25 PM	1:30 TO 3:00 PM	3:00 TO 4:00 PM
Improvisation CONFIDENCE & SPONTANEITY	TV Tots (Ages 4-6, Sundays only) ELECTIVE OR BREAK Vocals or Hip Hop (Sundays only)	TV/Film On-Camera Screen Acting HONING & ADVANCED	Self Tape Auditions & Voice Overs

TEENS

11:00 AM TO 12:25 PM	12:30 TO 1:25 PM	1:30 TO 3:00 PM	3:00 TO 4:00 PM
TV/Film On-Camera Screen Acting HONING & ADVANCED	ELECTIVE OR BREAK Vocals or Hip Hop (Sundays only)	Improvisation CONFIDENCE & SPONTANEITY	TV/Film Casting Director Rotation (ALL TEENS)

ADVANCED (AGES 16-25)

11:00 AM TO 12:30 PM	12:30 TO 1:25 PM	1:30 TO 3:00 PM	3:00 TO 4:00 PM
Actors Technique SCRIPT ANALYSIS & CHARACTER	BREAK	Meisner Technique LISTEN. ABSORB. REACT.	TV/Film Casting Director Rotation (ALL TEENS)

TV TOTS: Sunday only. Special Guest: Sesame Street Casting Director.

ELECTIVES: Choice of Vocals (Saturday or Sunday) OR Hip Hop with Robert Taylor Jr. (Sundays only).

REGISTER FOR 1 CLASS, 2 CLASSES, OR FULL DAY INTENSIVE

9-WEEKS	Full Day Intensive*	\$1595	6-WEEK HONING	Full Day Intensive	\$1095
	2 Core Classes	\$1290		2 Core Classes	\$895
	1 Core Class	\$645		1 Core Class	\$445
	Vocal Elective	\$450		Vocal Elective	\$350
	Hip Hop Elective	\$395		Hip Hop Elective	\$275
	TV Tots	\$525		TV Tots	\$375

*Free industry showcase 9-week Intensive registrants only.

FRIENDLY PAYMENT PLANS | MAKEUP DAYS | CLASSES DIVIDED BY AGE, MATURITY, & SKILL LEVEL



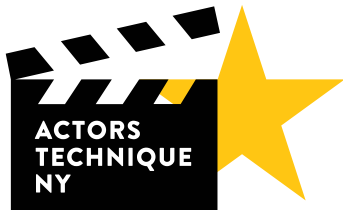
ATNY'S YOUTH MEMBERSHIP DISCOUNT

Just \$175. Save the day you register, then another 10% for a full year.
Get \$50 off for each new face referred.

PRIVATE ONLINE AUDITION COACHING BY APPOINTMENT.

IN-STUDIO

WINTER
2022



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 _____

DOES YOUR CHILD HAVE A DISABILITY? YES NO

IF YES, PLEASE SPECIFY: _____

CLASS SELECTION DAY PREFERENCE SATURDAY SUNDAY

TOTS Ages 4-6 (non-readers)

ATNY TV Tots (Sunday Only)

KIDS

Full-day Intensive	TV/Film On Camera Screen Acting	Improvisation	Self Tape Auditions & Voice Overs	ELECTIVE Vocals	ELECTIVE Hip Hop (Sunday Only)
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TEENS

Full-day Intensive	TV/Film On Camera Screen Acting	Improvisation	TV/Film Casting Director Rotation	ELECTIVE Vocals	ELECTIVE Hip Hop (Sunday Only)
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ADVANCED Ages 16-25

Full-day Intensive	Actors Technique Script Analysis & Character	Meisner Technique	TV/Film Casting Director Rotation
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SATURDAYS

JAN 29th – MARCH 26th

SUNDAYS

JAN 30th – MARCH 27th

PAYMENT INFORMATION

MC VISA AMEX

AMT CHARGED TODAY: \$ _____

NAME ON CARD _____

CARD NO. _____ EXP _____ CCV _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

DEPOSIT	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 _____