

The Shakespeare Theatre Academy

2017 Registration Form

please complete both pages

Space is limited. Register today!!

Student's Name: _____

Age (used to help pre-select scenes for classes): 18-25 26-35 36-50 51 and up Gender: M F

Theatrical Union Affiliation (if applicable): _____

Street Address: _____

City, State, Zip: _____

Home Phone: _____ Cell Phone: _____

Email: _____

CLASS SELECTION

Select the series for which you are registering:

SPRING 2016

- ____ SHAKESPEARE BOOK CLUB: *Merriment, Merchants and Meter (8 Sessions - no class on April 11)*
Tuesdays, 7:00 p.m. — 9:00 p.m. March 14 – May 9, 2017 \$400 _____
- ____ ADULT CLASSIC SCENE STUDY: *Moliere (6 Sessions - no class on April 12)*
Wednesdays, 7:30 p.m. — 9:30 p.m. March 2 – May 3, 2017 \$280 _____
- ____ WEEKEND SHAKESPEARE INTENSIVE FOR ACTORS in NJ: *with Artistic Director Bonnie J. Monte and Guest Artists*
Saturday, April 29, 2017 from 10:00 a.m. — 6:00 p.m. \$175 _____

FALL 2016

- ____ SHAKESPEARE BOOK CLUB: *Reading the Bard Aloud (8 Sessions - no class on Oct 31)*
Tuesdays, 7:00 p.m. — 10:00 p.m. Sept. 19 – Nov. 14, 2017 \$400 _____
- ____ ADULT CLASSIC SCENE STUDY: *Performing Shakespeare*
Wednesdays, 7:30 p.m. — 9:30 p.m. Sept. 20 – Nov. 8, 2017 \$365 _____
- ____ WEEKEND SHAKESPEARE INTENSIVE FOR ACTORS in NJ: *with Artistic Director Bonnie J. Monte and Guest Artists*
Saturday, 10/21 10:00 a.m. — 6:00 p.m. \$275 _____
Sunday, 10/22 12:00 p.m. — 4:00 p.m.

IMPORTANT INFORMATION:

Classes are filled on a first-come, first-served basis. Once a class has been filled, additional applicants will be placed on a waiting list and notified if a slot opens up.

All registration fees are **non-refundable**. Tuition balances must be paid in full on or prior to the first class date. Fees will only be refunded in the event that the requested class is cancelled or not available.

Unless otherwise noted, all classes take place either at the F.M. Kirby Shakespeare Theatre in Madison, NJ or The Shakespeare Theatre Support Facility in Florham Park, NJ.

Please return your completed registration form to:
The Shakespeare Theatre of New Jersey
The Shakespeare Theatre Academy
36 Madison Avenue
Madison, NJ 07940

Or register on-line by visiting:
www.ShakespeareNJ.org/Academy

Subscriber/Alumni/AEA/EMC Discount (\$20/series)- _____

One Time Multi-Class Discount (\$25)- _____

TOTAL TUITION \$ _____

PAYMENT OPTIONS

____ Check enclosed, made payable to "The Shakespeare Theatre of New Jersey"

____ Please charge my credit card.

Card Number: _____

Exp. Date: _____ Security Code: _____

Name as it appears on the card: _____

Signature Required: _____

If you would prefer to register and pay for classes over the phone, please give us a call at

973-845-6742

Acknowledgement and Waiver of Liability

I acknowledge that there are inherent risks associated and accompanied with stage combat, movement and theatre training activities and that I (or my child) may be injured as a result of an accident arising out of participation in the above mentioned activities.

In consideration for permitting myself (or the child) named above to participate in theatrical training activities, I release and hold harmless The Shakespeare Theatre of New Jersey and/or its employees, teachers, administrators, et al., from any and all liability including, but not limited to liability for injuries or damages sustained by the individual.

Registration and Cancellation Policy

All registration fees are **non-refundable**. Tuition balances must be paid in full on or prior to the first class date. Registration fees will only be refunded in the event that the requested class is cancelled or not available.

Photo and Video Release

I hereby understand and am fully aware that the student named above will be participating in activities conducted by the Education Department of The Shakespeare Theatre of New Jersey in which the student may be photographed or videotaped from time to time. I hereby irrevocably grant to The Shakespeare Theatre of New Jersey perpetually, exclusively, and for all media (hereinafter referred to as Property) throughout the world (including print, non-theatrical, home video, CD-ROM, DVD, internet and any other electronic medium presently in existence or invented in the future), the right to use and incorporate (alone or together with other materials), in whole or in part, photographs, sound bites or video footage taken as a result of participation in classes, workshops and activities run by The Shakespeare Theatre of New Jersey. I also hereby agree that I will not bring or consent to others bringing claim or action against The Shakespeare Theatre of New Jersey on the grounds that anything contained in the Property, or in the advertising and publicity used in connection herewith, is defamatory, reflects adversely on me or the student/participant named below, violates any other right whatsoever, including, without limitation, rights of privacy and publicity. I hereby release The Shakespeare Theatre of New Jersey, its Board of Trustees, officers and all employees and agents, of these parties from and against any and all claims, demands, actions, causes of actions, suits, costs, expenses, liabilities, and damages whatsoever that I may hereafter have against The Shakespeare Theatre of New Jersey in connection with the Property. This agreement shall not obligate The Shakespeare Theatre of New Jersey to use the Property or to use any of the rights granted hereunder, or to prepare, produce, exhibit, distribute or exploit the Property. The Shakespeare Theatre of New Jersey shall have the right to assign its rights hereunder, without my consent, in whole or in part, to any person, firm, corporation or organization.

Signature

I have completed all of the information requested above and hereby certify that I have read and agree to all of the statements listed above.

Signature of Student

Date