

1. Fill out the registration form or call us at (518) 462-4531 x410.
2. Return it to Capital Rep with your non-refundable deposit of \$200.
3. We'll send you a registration packet!

APPLICANT INFORMATION

_____ Male Female
 Name

 Parent/Guardian

 Address/City/ST/Zip

_____ _____ _____
 Daytime/Work Phone Evening/Home Phone Mobile Phone

 Email

 School

_____ _____ _____
 Age Grade Date of Birth

 How did you hear about STAR?

PAYMENT **Non-refundable deposit of \$200 required for enrollment**

I am interested in applying for tuition assistance.

My check made payable to Capital Repertory Theatre is enclosed.

Please charge my credit card: Visa MasterCard American Express

 Credit Card Number CID # (3-digit code)

_____ _____
 Expiration Date Amount to Charge

 Signature of Authorized Card Holder

Please return this form to:
Capital Repertory Theatre
 111 North Pearl Street
 Albany, NY 12207
 Attention: STAR

Payment plans and need-based tuition assistance are possible. Please call: 518.462.4531 x410 for further information.