

# REGISTRATION FORM

## MDP Workshop Registration

Name of Student: \_\_\_\_\_

Signature (Parent or Guardian if under 18): \_\_\_\_\_  
(Signature is required on this form. Signer agrees to all terms and conditions contained in our brochure)

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Work Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Email address: \_\_\_\_\_

Studio Name: \_\_\_\_\_

Studio Director's Name: \_\_\_\_\_

Studio Address: \_\_\_\_\_

Studio City: \_\_\_\_\_ Studio State: \_\_\_\_\_ Studio Zip: \_\_\_\_\_

Studio Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Studio Website: \_\_\_\_\_

Studio Email: \_\_\_\_\_

MDP City You Will Be Attending: \_\_\_\_\_

Early Discount Registrations must be Postmarked 21 Days Prior to Workshop

Level	# of Students	Early Discount	Full Price	Totals
Junior Level	_____ X	<b>\$189.00</b>	\$219.00 =	_____
Intermediate Level	_____ X	<b>\$229.00</b>	\$259.00 =	_____
Advanced Levels	_____ X	<b>\$229.00</b>	\$259.00 =	_____
<b>Workshop Total:</b>				<input style="width: 100px; height: 20px;" type="text"/>

### Performance Registration

Please fill out this section if you would like to perform in the Student/Faculty Performance  
 PLEASE ATTACH A SEPARATE SHEET WITH A LIST OF PERFORMER'S NAMES

**PERFORMANCE TOTAL:**   
(Number of Routines listed below: \_\_\_\_\_ X \$50.00)

	Routine Name	# of Students	Choreographer
1	_____	_____	_____
2	_____	_____	_____
3	_____	_____	_____
4	_____	_____	_____
5	_____	_____	_____

**GRAND TOTAL**   
(Workshop + Performance Total)

AMEX / VISA / M/C / DISCOVER \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Exp. Date: \_\_\_\_ / \_\_\_\_  
 Cardholder Signature: \_\_\_\_\_ CVV/CVC/CID Code On Card \_\_\_\_\_  
 FILL OUT CREDIT CARD INFO OR INCLUDE CHECK OR MONEY ORDER AND MAIL TO:  
**Manhattan Dance Project**  
 7942 W Bell Rd OR CALL: (623) 376-7578  
 Ste C5 #615 OR FAX FORM TO: (623) 376-7579  
 Glendale, AZ 85308 OR REGISTER ONLINE AT: <https://store.mdpdance.com>



CCB \_\_\_\_\_ APRVL \_\_\_\_\_ AMT \_\_\_\_\_ RECVD \_\_\_\_\_  
 CASH \_\_\_\_\_ CKNO \_\_\_\_\_ AMT \_\_\_\_\_ RECVD \_\_\_\_\_

### Students Registered

#### Beginner/Intermediate

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#### Advanced Level

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#### Both Levels

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**REGISTER ONLINE**  
<https://store.mdpdance.com>

BOOK A MDP MINI-WORKSHOP AT  
**YOUR STUDIO TODAY**  
 CALL (623) 376-7578

JOIN US FOR  
**MDP SUMMER INTENSIVES**  
 MORE INFO AT  
[www.mdpdance.com](http://www.mdpdance.com)