

Amount Due	For Office Use Only Payment Method	Payment Date
------------	---------------------------------------	--------------

**AMARILLO LITTLE THEATRE ACADEMY  
REGISTRATION FORM**

NAME \_\_\_\_\_ AGE \_\_\_\_\_  
 PARENT NAME \_\_\_\_\_ MALE \_\_\_\_\_ FEMALE \_\_\_\_\_  
 HOME ADDRESS \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
 HOME PHONE \_\_\_\_\_ BUSINESS PHONE \_\_\_\_\_  
 EMAIL ADDRESS \_\_\_\_\_  
 CLASS \_\_\_\_\_ DAY \_\_\_\_\_ TIME \_\_\_\_\_ TEACHER \_\_\_\_\_

---



---



---



---

Amount Due	For Office Use Only Payment Method	Payment Date
------------	---------------------------------------	--------------

**AMARILLO LITTLE THEATRE ACADEMY  
REGISTRATION FORM**

NAME \_\_\_\_\_ AGE \_\_\_\_\_  
 PARENT NAME \_\_\_\_\_ MALE \_\_\_\_\_ FEMALE \_\_\_\_\_  
 HOME ADDRESS \_\_\_\_\_  
 CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_  
 HOME PHONE \_\_\_\_\_ BUSINESS PHONE \_\_\_\_\_  
 EMAIL ADDRESS \_\_\_\_\_  
 CLASS \_\_\_\_\_ DAY \_\_\_\_\_ TIME \_\_\_\_\_ TEACHER \_\_\_\_\_

---



---



---



---