Maui Academy of Performing Arts ~ MAPA

81 N. Church St., Wailuku HI 96793 | p: 244-8760 | f: 244-6530

friendsofmapa@mauiacademy.org | www.mauiacademy.org

Student Last Name, First

2011- 2012 Registration Form

This is a fill-able pdf and may be completed on your computer, saved and emailed to: friendsofmapa@mauiacademy.org.

Or you may print, complete and return it to Maui Academy of Performing (address and fax number listed below).

that you most identify with as well as your physical address. Names are NOT used. Mahalo for your kokua. Afro-American	Student 1 S	tudent 2	Student 3
Address: City: State: Email: We do not share our email list with other organizations. Student(s) Live with: Both Parents Mother Father Stepparent Steppare	First:	irst: irade: chool: OB: Mge M	First: Grade: School: DOB: M F
Primary Contact Mother Father Stepparent Self Mother Father Stepparent Last: First:	Address: City: State: Zip: Email:		QB
Mother	Student(s) Live with:	☐ Mother ☐ Father ☐ Other:	
Last: First: Relationship: Phone: County, State, and Federal grant reports often ask us the geographic and ethnic make-up of clients served. Please help us with our reporting by marking the ethnic heritage below that you most identify with as well as your physical address. Names are NOT used. Mahalo for your kokua. Afro-American Asian (Japanese, Filipino, Chinese, Korean, etc.) Pacific Islander (Tongan, Samoan, Fijian, etc.) Aleutian/Native American Indian Doctor name: Facility: Phone: County: Phone: Special needs: Central Maui East Maui Bast Maui B	Mother	Last: First: Place of Work: Home phone: Cell phone:	er Stepparent
that you most identify with as well as your physical address. Names are NOT used. Mahalo for your kokua. Afro-American	Last: First: Relationship:	Facility: Phone:	
□ Asian (Japanese, Filipino, Chinese, Korean, etc.) □ Pacific Islander (Tongan, Samoan, Fijian, etc.) □ Upcountry □ West Maui □ Aleutian/Native American Indian □ Hispanic (Puerto Rican, Mexican, etc.) □ South Maui □ Other	that you most identify with a	as well as your physical address. Names are NOT used. N	Mahalo for your kokua.
□ Aleutian/Native American Indian □ Hispanic (Puerto Rican, Mexican, etc.) □ South Maui □ Other			
□ Hawaiian/ Part Hawaiian □ Other	• • • • • • • • • • • • • • • • • • • •	, , , , , , , , , , , , , , , , , , , ,	

How did you hear	about us?
□ Word of Mouth□ QKC Poster□ MAPA Playbill□ Maui Family Magazine□ On Maui Magazine	□ Email □ Website □ Online Search □ Facebook □ Other:





2011 Fall Semester

This is a **fill-able pdf** and may be completed on your computer, saved and emailed to: <u>friendsofmapa@mauiacademy.org</u>. Or you may print, complete and return it to Maui Academy of Performing (address and fax number listed below).

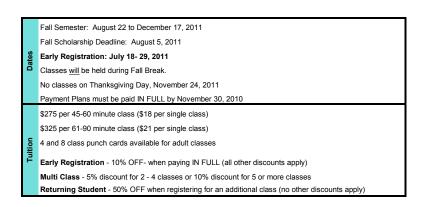
Parent Contact:		Student 1 (Last, First name):	Age
Parent Phone Number:	Student 2:		
	Student 3:		

NOTE: If any of your other contact information (address, email, emergency contact etc.) has changed since Spring 2011 please complete the Contact Information Change Form available at: www.mauiacademy.org.

	# of Students	Student Initials								4	# of Students	Student Initials							
	# Stu	Stu	Time	Std.	Class	Age	Ins	Tuit	tion	┪,	Stu #	E Stu	Time	Std.	Class	Age	Ins	Tuit	tion
			3:00-3:45	С	Beg Ballet	5-7	KT	\$ 2	275				3:15-4:00	В	Beg Hip Hop	8-11	JW	\$ 2	275
			3:45-4:45	В	Teen Hip Hop Crew*	13+	KD	\$ 2	275				3:30-4:30	Α	Ballet I/II	8-11	VH	\$ 2	275
			3:45-4:30	С	Beg Jazz/ Tap	5-7	KT	\$ 2	275				3:30-4:30	С	Int Choreography	11-14	RO	\$ 2	275
a			4:45-5:45	В	Open Hip Hop	11+	KD	\$ 2	275				3:45-4:30	SCK	Pre Ballet	3	TBA	\$ 2	275
Monday			4:30-5:30	С	Broadway Dance	7-9	KT	\$ 2	275				4:00-4:45	В	Hip Hop I	9-12	JW	\$ 2	275
ž			4:45-6:00	Α	Jazz II/III	11-14	CR	\$ 3	325				4:00-5:00	D	Tap II/III	10+	AC	\$ 2	275
			5:30-6:30	D	Broadway Dance	10+	KT	\$ 2	275	>			4:30-5:45	Α	Ballet II, 1st & 2nd Yr. Pointe*	11+	VH	\$ 3	325
			6:00-7:00	С	Jr Perf Group*	12-14	CR	\$ 2	275	sqa			4:30-5:15	С	Beg Ballet/ Tap		RO	\$ 2	275
			6:00-7:30	A/B	Open Jazz Technique III+	14+	LAL	\$ 3	325	Thursday			4:30- 5:15	SCK	Pre Ballet	4	TBA	\$ 2	275
			7:30-8:30	A/B	Dance Theatre*	15+	KA	\$ 2	275	⊢∟			4:45-6:00	В	Ballet III, 3rd Yr. Pointe*	13+	KM	\$ 3	325
			3:00-3:50	С	Beg Ballet I	6-8	BBJ	\$ 2	275				5:00-5:45	D	Boys Hip Hop & Break-Dancing	8-13	JW	\$ 2	275
			3:00-3:50	D	Jazz/ Tap I	8-11	AC	\$ 2	275				5:15-6:15	С	Dance Technique I	T&A	RO	\$ 2	275
			3:15-4:15	Α	Contemporary I* ◊	10-13	RO	\$ 2	275				6:00-7:30	Α	Jazz III/IV	13+	CR	\$ 3	325
			3:15-4:15	В	Ballet I/II, Pre-Pointe	10-12	VH	\$ 2	275				6:00-7:30	В	Jazz IV	14+	LAL	\$ 3	325
			3:50-4:40	С	Ballet I	8-11	BBJ	\$ 2	275				6:15-7:15	С	Beg Dance Technique	T&A	KM	\$ 2	275
			3:50-4:40	D	Beg Jazz/ Tap I	6-8	AC	\$ 2					7:30-8:30	Α	Dance Company II*	14+	KA		275
≥			4:15-5:15	Α	Int Hip Hop Crew*	9-11	RO	\$ 2					7:30-8:30	В	Dance Company I*	14+	KM	\$ 2	
Tuesday			4:15-5:30	В	Ballet II	11+	VH	\$ 3					9:30-10:15	В	Mommy & Me	1-2.5	RO	\$ 2	275
l e			4:40-5:40	С	Ballet I/II	10+	BBJ		275				3:00-4:00	D	Storytime Theatre	5-10	KS		275
ľ			4:45-6:15	D	Glee Club	11+	RO/TBA			_			3:15-4:00	В	Pre Ballet	3-4	KT	\$ 2	
			5:30-6:45	Α	Ballet III	13+	VH/KM	\$ 3		L			3:15-4:00	С	Beg Hip Hop	5-6	RO		275
			5:30-6:45	В	Ballet III	13+	VH/KM		325	_			3:15-4:00		Broadway Dance	5-10	TBA		275
			5:40-6:25	С	Broadway Dance	8-10	BBJ		275	Friday			3:30-4:30	Α	Open Hip Hop	11+	KD		275
			6:45-7:45	Α	Open Ballet II	12+	KM		275	ᅩ			4:00-5:30	В	Ballet III/IV, Pointe*	13+	KM		325
			6:45-8:15	В	Ballet IV	14+	VH		325	_			4:00-4:45	С	Beg Ballet I	6-8	RO		275
-			6:25-7:15 2:30-3:30	C D	Broadway Dance	11-13 5-7	BBJ KS	_	275 275	<u> </u>			4:00-5:30	D A	Comedy Improv Troupe	10+	KS	\$ 3	325
			2:55-3:45	A	Magical Adventures Beg Ballet	5-7	BBJ	\$ 2		-			4:30-5:30 4:45-5:30	C	Jazz II/III Keiki Hip Hop Crew*	12+ 6-9	KD RO		275 275
			3:15-4:15	В	Ballet I/II, Pre-Pointe*	10-12	VН	\$ 2		<u> </u>			5:30-6:30		Int/Adv Turns and Leaps	11+	KM	\$ 2	
			3:30-5:00	D	Acting from a Script	10-12	KS	\$ 3					9:00-9:45	A	Beg Ballet I	6-7	RO		275
			3:30-4:15		Beg Ballet	5-7	TBA	\$ 2		-			9:00-9:45	В	Pre Ballet	4	KT		275
			3:45-4:45	A	Ballet I/II	8-11	BBJ	\$ 2		-			9:00-9:45	С	Beg Ballet	5-6	AD		275
			3:45-4:30	c	Hip Hop I	8-11	RO		275	-			9:00-9:45	D	Pre Ballet	3	NG		275
			4:00-6:00	SP	Teen Acting Perf Troupe	11+	SS	\$ 3		-			9:45-10:30	Α	Jazz/ Tap I	7-10	RO		275
day			4:15-5:30	В	Ballet II, Pointe*	11+	VH	\$ 3					9:45-10:30	В	Pre Ballet	3	KT		275
Wednesday			4:15-5:00		Jazzy Hip Hop	5-7	TBA	\$ 2					9:45-10:30	c	Beg Jazz/ Tap	5-6	AD		275
led/			4:30-5:15	С	Beg Hip Hop	7-10	RO	\$ 2					9:45-11:15	D	Acting Bootcamp	11+	SS	\$ 3	
>			4:45-5:30	Α	Jazz I/II	8-11	BBJ	\$ 2		^			10:30-11:15	Α	Ballet I	7-10	RO		275
			5:00-6:00	D	Pint Size Players	7-10	KS	\$ 2	275	rda			10:30-11:45	В	Ballet III	12+	TBA	\$ 3	325
			5:15-6:00	С	Jazz I/II	8-11	RO	\$ 2	275	Saturday			10:30-11:15	С	Beg Jazz/ Tap	7-9	KT	\$ 2	275
			5:30-6:45	Α	Ballet III, Pointe*	13+	VH/KM	\$ 3	325	Š			11:15-12:00	Α	Hip Hop I	7-10	JW	\$ 2	275
			5:30-6:45	В	Ballet III, Pointe*	13+	VH/KM	\$ 3	325				11:15-12:15	С	Contemporary I*◊	11-14	RO	\$ 2	275
			6:00-6:45	С	Keiki Perf Group*	8-11	RO	\$ 2	275				11:15-12:00	D	Beg Ballet I	7-9	KT	\$ 2	275
			6:45-7:45	Α	Int/Adv Jazz for Adults	18+	LAL	\$ 2	275				11:45-1:00	В	Ballet IV	12+	TBA	\$ 3	325
L			6:45-8:15	В	Ballet IV, Pointe*	14+	VH	\$ 3	325				12:00-12:45	Α	Int Hip Hop I	10+	JW	\$ 2	275
													12:00-1:00	D	Broadway Dance	7-11	KT	\$ 2	275
		= Dra	ma		= MAPA West								12:30-1:30	С	Jazz II	11-14	RO	\$ 2	275
	T & A	= Teer	s & Adults										1:00-2:30	A/B	Adv Chore & Technique ◊	14+	KM	\$ 3	325
	* Pre-	requis	te. Please se	ee 201	1 Fall Schedule.								1:30-2:30	С	Int Perf Group*	11-13	RO	\$ 2	275

[•] Additional dance attire required. Visit: www.mauiacademy.org/dance.asp

Paymen	it					
Payment Type:	Credit Card Cash	Check#		# of 60 minute classes: # of 60+ minute classes:	x \$275 x \$325 Tuition Subtotal 1	
Name on card: Card number: Exp Date: Billing Address: City/ State:		Card Cod	e:	10% Early Discount (for full py	Discount (5% or 10%) Subtotal 2	5):
	Please charge my card fo	1.	nthly payments.	Non-refundable Registration	Credits Subtotal 4	\$35
	For Office Use Only: QB Payment Total Info			Minimum Amounts Sep 30- \$ Oct 30- \$ Nov 30- \$	yment Plan: \$25 fee 1/4 Tuition Subtotal 4 Subtotal 4 + \$35 + \$25 Amout Paid Today Balance Due	
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This constitutes an ag changes thereafter, in classes. Credits for dr missing classes for tw checks. With one NSF	ncluding classes changed Iropped classes will not be vo weeks or more, accoun F, future payments must b	A and the authorize and/or dropped, v e issued after the f nts may be credite be made by cash o	will be subject to a \$25 fe fouth week of classes. Di d for one subsequent ser or money order.	stration form. Payment is due in full or by pre-ar ee per change. Refunds for dropped classes will iscounts may be adjusted according to changes i mester upon submission of a physician's note. A	rranged payment plan at s not be issued after the se in classes. If an injury ned A \$35 fee will be assessed	signing. Any class econd week of cessitates for all returned
This constitutes an ag changes thereafter, ir classes. Credits for dr missing classes for tw checks. With one NSF Using the MAPA's Bel issue cannot be resolv Please visit our websit hereby authorize the and/or medical group will select a physician volunteers from all liadue care on the part of Your signature also gi	greement between MAPA neluding classes changed tropped classes will not be to weeks or more, account, future payments must be chavior Policy (3 strike disclared). It is at www.mauiacademy ee Maui Academy of Perfop when the designated en when deemed necessary ability for damages, includ of the said entities for injuives MAPA permission to	and the authorize and/or dropped, we issued after the first may be credite be made by cash ocipline) outlined o worg/academydet orming Arts (MAPA mergency contact y. I understand the ding but not limite uries to myself or use any photos ta	will be subject to a \$25 fe fouth week of classes. Di d for one subsequent ser or money order. In our website, MAPA tea wils. asp for a complete o (A), its employees, teacher cannot be reached. If no at I am voluntarily executed to bodily injuries and p my child. Iken of the student(s) bei	stration form. Payment is due in full or by pre-ar ee per change. Refunds for dropped classes will iscounts may be adjusted according to changes i	rranged payment plan at s not be issued after the se in classes. If an injury ned A \$35 fee will be assessed y to remove a student if a ered student(s), to the nar oyees, teachers, and autho is employees, teachers and s resulting from gross neg aterial including, but not li	signing. Any class econd week of cessitates for all returned disciplinary med physician orized volunteers d all authorized ligence or lack of mited to,
This constitutes an ag changes thereafter, in classes. Credits for dr missing classes for tw checks. With one NSF Using the MAPA's Bel issue cannot be resolv Please visit our websi I hereby authorize the and/or medical group will select a physician volunteers from all liadue care on the part of Your signature also gibrochures, publication MAPA.	greement between MAPA ncluding classes changed iropped classes will not be wo weeks or more, account, future payments must be chavior Policy (3 strike disclassed wed. The strike at www.mauiacademy of Perform when the designated en maken deemed necessary ability for damages, including the said entities for injuitives MAPA permission to ons or advertising. I under	and the authorize and/or dropped, we issued after the facts may be credited be made by cash of cipline) outlined of comming Arts (MAPA mergency contact by I understand the ding but not limited uries to myself or use any photos tates and there will be and and agree to I and and agree to I and or	will be subject to a \$25 fe fouth week of classes. Did for one subsequent seror money order. In our website, MAPA teadils.asp for a complete of alls.asp for a complete of all alls.asp for a complete of a complete of all alls.asp for a complete of a complete of all alls.asp for a complete of alls.asp for all alls.asp for a complete of	stration form. Payment is due in full or by pre-are per per change. Refunds for dropped classes will iscounts may be adjusted according to changes is mester upon submission of a physician's note. An achers and staff have the discretionary authority putline of our policies and proceedures. It is an authorized volunteers to refer my register family physician is designated, MAPA, its emploiting this waiver and that it shall relieve MAPA, it property damage. This waiver excludes damages ing registered with this form, in promotional massation for the publication of these photos and the ceedures listed above and on our website a	rranged payment plan at so not be issued after the se in classes. If an injury ned A \$35 fee will be assessed by to remove a student if a sered student(s), to the nare syees, teachers, and authous employees, teachers and seresulting from gross negleaterial including, but not limit these photos are the position of the series of the series and authous series and authous series are series.	signing. Any class econd week of cessitates for all returned disciplinary med physician orized volunteers d all authorized ligence or lack of mited to,





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friendsofmapa@mauiacademy.org

~www.mauiacademy.org~

Physical Address of MAPA Main:

2027 Main St., Wailuku ~ Please enter from the back on Market St. Physical Address of MAPA West:

4327 L. Honoapiilani Rd., Lahaina