

*Children ages 5 and older may enroll in the children's chorus if they are siblings of high school participants or related to adult registrants.

REGISTRATION INFORMATION (REGISTRATION WILL CLOSE AS PROGRAM FILLS)	PAYMENT INFORMATION (PLEASE DO NOT SEND CASH BY MAIL)
Participant Name	A \$75 non-refundable deposit (per program) is due upon enrollment. Tuition balance due prior to first rehearsal. Payment plans available.
Is this the participant's first ARIEL production? Yes \Box No \Box	Payment Method
Date of Birth Age Female D Male D	□ Cash Amount
Grade School Name	Check # Amount
Mailing Address	Credit Card (details below)
City Zip Code	Please charge my Visa D MasterCard D
Home Phone	Card #
Mom's Name Cell #	Expiration V-Code
Dad's Name Cell #	Amount to be charged at this time
Email Contact	
Would you like to be added to ARIEL's email contact list? Yes □ No □	Name on Card
How did you hear about us?	Date: Signature
Please submit completed form to ARIEL Theatrical.	Office Use Only
Enrollment confirmation will be by mail.	Balance Due \$ Payment Date
 ♦ Mail: ARIEL Theatrical, PO Box 1268, Salinas, CA 93902 ♦ Email: ariel@arieltheatrical.org ♦ Phone: (831) 775-0976 ♦ Fax: (831) 256-7316 	Early Bird
 ◆ The Karen Wilson Children's Theatre, 320 Main Street, Salinas ♦ www.arieltheatrical.org 	Paid in Full