

Portland Actors Conservatory
Classes Registration Form

Portland Actors Conservatory
REGISTRATION FORM - STUDIO PROGRAM

Enrollment

All new applicants are interviewed by the PAC Artistic Director before enrollment, unless registering for a class that has no prerequisites. The informal interview ensures proper placement in the program. No audition is necessary. *Call 274-1717 to make an appointment.*

Fees and Payment

Fees for each class are listed in 'Class Schedule' in this brochure. A deposit of one-half of the tuition is required with registration in order to secure a spot, with the balance due *on or before* the first day of class. A deferred payment plan is available for a \$25 service fee and must be arranged prior to the first class. "Track" students who wish to set up a monthly pay plan should contact the business office.

Transfers

If a transfer is requested *before* the class starts that you are transferring from, we transfer 100% of your funds. If a transfer is requested *after* the class starts that you are transferring from, the same rules apply as for refunds.

Refunds

Classes with insufficient enrollment will be cancelled and fees refunded in full. Upon written cancellation received by PAC before the scheduled class start date, the student will be eligible to apply payments made to future classes within the academic school year, less a \$75 processing fee. Upon written cancellation received after the class begins, the student will be assessed a \$75 processing fee and be eligible to apply payments made, less a prorated amount for classes that have taken place, to classes within the academic year. No reapplication of funds after 50% of the class has been offered.

Note: No tuition will be refunded for Acting Level Two, Three, Four, Shakespeare or any Scene Study or Film class. Funds may be transferred to a future class if the student withdraws, in writing, two weeks or more before the official start date of the class.

REGISTRATION

Sign up for:	Dates	Tuition
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
		Subtotal _____
		Donation _____
		Total _____

____ **I have read and understand the PAC Refund Policy.**

____ **I understand, that at this time, I am not enrolling in the Two-Year Professional Actor Training Program**

Name _____
Address _____
City, ST, Zip _____
Phone-Home _____
Phone-Work _____
Phone-Cell/Page _____
Email _____

Method of Payment: ____ check ____ VISA ____ MasterCard
Card Number _____ Exp Date _____
Signature _____

Portland Actors Conservatory

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Phone: 503-274-1717 **Fax:** 503-274-0511 **Email:** pacinfo@actorsconservatory.com