

APPLICATION JUNE 24 - JULY 19, 2019

Please complete all three (3) pages of this application.

STUDENT INFORMATION

Note: Applicant must be at least 12 years old and no older than 16 by the first day of class. ACYA is a daytime program—No overnight accommodations or evening supervision is provided. In addition to the application, a phone interview may be required for international applicants.

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Student's name	Birth date	Gender (optional)	Ethnicity	(optional)
() Home Phone	() Cell Phone	Stude	ent's Email	
School		Grad	e	
Home Address	City	State	Zip	Country
PARENT / GUARDIAN	INFORMATION			
Parent 1 / Guardian Name	Phone	Email		
Parent 2 / Guardian Name	- () Phone	 Email	<u> </u>	
Falent 2 / Guardian Name	THORE	Email		
Address (if different from above)	City	State	Zip	Country
	City	State	Zip	Country
Address (if different from above)	City ergency if parent(s) / gua	State ardian(s) are unavai	Zip	Country -

Relationship to Student

ACYA APPLICATION

Page 2 of 3

DRAMATIC TRAINING / EXPERIENCE (if any)

TRAINING (acting/voice/dance	<i>)</i> :				
EXPERIENCE:					
Show	Role			Location	
TUITION AND FEES Only one discount applies per enrolln					
	sive Tuition or return student discount applies nt on signature page for details)	to applica	ant	\$ 2,295	
☐ Non-refundable appl	cation fee (optional application code))	25	
			TOTAI	_	
METHOD OF PAYM	ENT				
☐ Check (payable to The American Ac	ademy of Dramatic Arts)	y Order	☐ Visa	☐ Mastercard	☐ Discover
Card Number		Expirat	tion Date: _	/	
Security Code Upon	n completing this form your card w	'll be charg	ged the amo	ount indicated abo	ove (U.S. Dollars).
Card Member's Signature		Print Name as it Appears on the Card			
Billing Statement Mailing Address	City	Sta	ite	Zip	Country
How did you hear about The Aca	demy's Conservatory for Young Ad	ctors?			
	,				

LETTER OF AGREEMENT

This is a letter of agreement between The American Academy of Dramatic Arts (the School) and the applicant indicated on this application (Student) for the purpose of stipulating the conditions and terms of the Student's enrollment.

- Scheduled Classes: All classes are held at 1336 North La Brea Avenue, Los Angeles, CA, unless otherwise noted.
- Tuition Payment: Full tuition payment is required with the completed application form and registration fee.
- Discounts:
 - Family discount: siblings or children of students currently enrolled in The Academy's Full-Time Program receive a 15% discount off full tuition.
 - Multiple discount: first child enrolled pays full tuition. Each additional sibling receives a 15% discount off full tuition.
 - Return student discount: students who previously attended ACYA receive 15% discount off full tuition.
- Withdrawal and Refund Policy: Requests for refunds must be made in writing to the Director of ACYA and received no later than June 1, 2019. No refunds will be granted after classes have begun. A student is not eligible for a refund if expelled.
- Appropriate Behavior on Campus: All students in Academy programs must conduct themselves in a manner conducive to an environment of positive learning. Respect, courtesy and care are mandatory. Breaches of common decency in behavior will be cause for disciplinary action up to and including expulsion.
- Attendance: Being on time for all classes and rehearsals is required. Once checked in at the start of day, students are not allowed to leave campus without a parent/quardian or written permission from his/her parent/quardian.
- Language Proficiency: All students attending ACYA must be fluent in English.
- Supervision: All students attending ACYA from areas other than Los Angeles must have a parent or guardian to supervise them outside of program hours.

Authorization to Consent to Treatment of Minor for Presentation to a Licensed Hospital:

In the unlikely event of a medical emergency and a parent or guardian cannot be reached, I/we the parent(s) or guardian of a minor, do hereby authorize The American Academy of Dramatic Arts as agent for the undersigned to consent to any x-ray examination, anesthetic, medical or surgical diagnosis or treatment and hospital care which is deemed advisable by, and is to be rendered under the general or special supervision of any physician and/or surgeon licensed under the provisions of the Medicine Practice Act on the medical staff of any licensed hospital, whether such diagnosis or treatment is rendered at the office of said physician or at said hospital. It is understood that this authorization is given in advance of any specific diagnosis, treatment, or hospital care being required but is given to provide authority and power on the part of our aforesaid agent to give specific consent to any and all such diagnosis, treatment, or hospital care which the aforementioned physician in the exercise of his best judgment may deem advisable. This authorization is given pursuant to the provision of Section 25.8 of the Civil Code of California. This authorization shall remain effective unless revoked in writing delivered to said agent.

By signing below the Student applies for enrollment in the The Academy's Conservatory for Young Actors Summer Program according to the terms and conditions outlined in this Letter of Agreement and accepts enrollment upon receipt of confirmation from The Academy. The Student also acknowledges that The Academy's Conservatory for Young Actors Handbook will be read upon receipt by the first day of class, and will be familiar with its contents and abide by the procedures and regulations contained therein.

Date	_
Print name of Student	
Signature of Applicant (Required)	
Signature of Parent or Guardian	

Decisions concerning admissions made by The American Academy of Dramatic Arts are based on talent and qualifications without regard to race, color, religion, gender, age, ethnic origin or disability.

Note: The ACYA program does not issue visas or I-20s.

INSTRUCTIONS FOR SUBMITTING APPLICATION

Please send all three (3) pages of this application to **one** of the following: **Email** youngactors@aada.edu, **Fax** 323-464-1128 or **Mail** 1336 North La Brea Avenue, Los Angeles, CA 90028

Questions? Call 800-222-2867