

## 2024-2025 Spotlight Application

## **Personal Information:**

Student Name		
Address	City/State	Zip
School	Grade (fall of 202	24)
Parent/Guardian Name(s)	Cell Phone	
Parent E-Mail (Important: Most information regal	rding the group will be sent	via email)
Please Read Carefully and Check To Agre	ee:	
I am available for rehearsals every W	EDNESDAY from 4:45-6:15PN	Л.
I am able to commit to rehearsals and	d performances for the entire 2	024-2025 season.
I understand that there is a fee of \$37 \$100 is required with this application		
Tuition Payment Options: Once placed in the group, two options are available to pay in full at first rehearsal in August 2024: Back 2. Tuition balance billed in two monthly installments.	alance of \$275.	
Student Signature		ate
Parent Signature	 Da	ate