

**Pennsylvania Youth Theatre  
School of Performing Arts 2006 – 2007  
DROP/ADD FORM**

Student Name: \_\_\_\_\_ Age: \_\_\_\_\_ Grade: \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Circle One	Class	Day/Time	Instructor
Drop                  Add			
Drop                  Add			
Drop                  Add			
Drop                  Add			

\*If drop is...

- Before the fourth lesson deadline, you will receive a prorated refund of tuition less the \$50 registration fee per class.
- After the fourth lesson deadline, NO REFUNDS.

Remarks:

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Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*Drop/Add Form must be submitted to the Office in order to cease billing.*

**OFFICE USE ONLY:**

Date Filed with Office: \_\_\_\_\_ Instructor Notified: \_\_\_\_\_ Pro-rated refund due: \_\_\_\_\_ Processed by: \_\_\_\_\_