

#### STUDENT REGISTRATION KALAMAZOO RESA EDUCATION FOR THE ARTS

To be completed by the student and parent/guardian and submitted to school counselor.

Student Name		Date of Birth	Gender (please check one)		15/16 Grade Level
			Male	Female	
Home School	High School of Residence	Phone Number	Parent/Guardian		Contact Phone Number
Home Street Address		City	Zip code	Email address	
Transportation (if EFA program is offsite)					
Student Driving:   Yes   or   No   Bus:   Yes   or   No   (dependent upon local school district policy)					

#### PROGRAM SELECTION

□ This is my first year in the selected program

□ I am a returning 2<sup>nd</sup> year or advanced student (*requires teacher approval*)

EFA Teacher Approval Required: \_

#### DANCE

#### □ Modern/Jazz Dance Studio (indicate section)

- Loy Norrix full year
- □ Loy Norrix □ 1<sup>st</sup> Tri □ 2<sup>nd</sup> Tri □ 3<sup>rd</sup> Tri
- □ Kalamazoo Central full year
- □ Kalamazoo Central □ 1<sup>st</sup> Tri □ 2<sup>nd</sup> Tri □ 3<sup>rd</sup> Tri
- Comstock full year
- □ Portage Central after school full year
- □ Advanced Dance Company (requires teacher approval) □ dancEXperiment Lab
- □ Integrated Dance/Health/PE (indicate section)
  - □ full year
    - □ 1<sup>st</sup> Semester only
    - $\Box$  2<sup>nd</sup> Semester only

#### VISUAL ARTS

- □ Advanced 2-D Art (indicate section)
  - □ 1<sup>st</sup> Semester, Wednesday evening program
- □ 2<sup>nd</sup> Semester mornings program
- □ Advanced 3-D Art (indicate section)
  - □ 1<sup>st</sup> Semester mornings program
  - $\Box$  2<sup>nd</sup> Semester, Wednesday evening program
- □ Studio Art Weekends

## MEDIA ARTS

□ Advanced Multimedia Arts (requires teacher approval) □ Advanced Video Arts Studio (indicate section)

Teacher's Signature

- □ full year
- $\Box 1^{st} \text{ Semester only} \\ \Box 2^{nd} \text{ Semester only}$
- Design for Digital Media
- □ Film and Video Arts

### THEATRE AND MUSIC

Advanced Musical Theatre Workshop
Theatre Improv and Scriptwriting
Music Studio I, Tuesday evenings
Advanced Music Studio, Thursday evenings

#### **ONLINE AND BLENDED LEARNING**

□ Creative Writing Online – 1<sup>st</sup> semester
□ Digital Storytelling Online – 2<sup>nd</sup> semester
□ Digital FilmArt – 1<sup>st</sup> sem - Online/Monday evening
□ Digital GraphicArt – 1<sup>st</sup> sem - Online/Wed eve
□ Digital StudioArt – 2<sup>nd</sup> sem - Online/Monday evening
□ Digital PhotoArt – 2<sup>nd</sup> sem - Online/Wednesday eve

# PARENT/GUARDIAN APPROVAL FOR REGISTRATION

I/we understand that our daughter/son is registering for an Education for the Arts program offered by the local schools through the Kalamazoo County Education for the Arts consortium and that:

- 1. Daily attendance is <u>REQUIRED</u>.
- 2. All students will be responsible for following the rules established by the program and failure to do so can result in removal.
- 3. Transportation may be the responsibility of the student if the local school does not provide transportation.
- 4. The sending school is making a financial commitment and students are expected to complete the full enrollment period.

I have read the attached information about the program, including the Special Requirements sheet, and give my approval for my son/daughter,

\_\_\_\_, to enroll in the above program.