

ORANGE COUNTY



**ORANGE COUNTY CRAZIES  
IMPROVISATIONAL COMEDY CLASS**

**STUDENT APPLICATION**

NAME  BIRTHDATE

ADDRESS

HOME PHONE  CELL PHONE  WORK PHONE

EMAIL

I WANT TO STUDY IMPROV BECAUSE

DO YOU HAVE ANY BACKGROUND OR TRAINING IN ACTING? IF SO, PLEASE EXPLAIN

SO THAT WE CAN UNDERSTAND MORE ABOUT YOU AS A PERSON, PLEASE COMPLETE THE FOLLOWING:

WHAT ARE YOUR STRENGTHS?

WHAT ARE YOUR WEAKNESSES?

EXPLAIN YOUR OCCUPATION AND WHAT YOU LIKE AND DISLIKE ABOUT IT

WHAT ARE YOUR HOBBIES AND/OR SPECIAL INTERESTS?

WHAT ARE YOUR ASPIRATIONS IN TAKING THIS CLASS? ARE YOU INTERESTED IN BECOMING A PERFORMER?

AS AN END RESULT, WHAT DO YOU HOPE TO GET OUT OF THIS CLASS?

I understand that all class enrollments are kept to a minimum in order to ensure individualized attention. As a result, I understand that my absence may disturb the dynamics of the class. Therefore, I agree that when I enroll in a class, I will be fully responsible for attending the seven (7) instructional classes, plus the "Graduation Show." Also, I understand that the class tuition is due with the submission of this application, and is not refundable for any reason.

Signature

Date

I understand that all exercises , lesson plans, and class curricula are the property of the Orange County Crazies and that use of any or all of any parts of the lesson exercises and plans are strictly prohibited. I agree not to use any lessons or portions thereof, without express written permission.

Signature

Date

**Please fax back to 714-550-0825 or email to [Cherie@KerrPR-ExecuProv.com](mailto:Cherie@KerrPR-ExecuProv.com)  
Call 714-550-9890 if you have any questions**