

BROADWAY CONNECTION MASTER CLASS

BEGINNING/INTERMEDIATE level MUSICAL THEATRE JAZZ DANCE IN THE STYLE OF "LION KING"

WHERE

Ballet Arts Academy

109 W Pacific Ave Spokane, WA (Diamond pay parking lot or metered street parking)

WHEN

Saturday, February 2nd, 2019 Class: 10:00-11:45AM

Question/Answer period: 11:45-Noon

COST

INDA member student: \$25.00 in advance

NON-member: \$35.00 / Door Rate member & non-member if space available.

Check made payable to "INDA"

MAIL TO: INDA Attn: Isabelle Cook; 4120 South Sullivan Rd; Veradale, WA 99037

WITH

Erynn Dickerson Ensemble Cast member of "Lion King"

Erynn began her artistic studies at the Debbie Allen Dance Academy, where she was cast in various musical theater productions at the Freud and Geffen Playhouse. She then graduated from Fordham University and the Alvin Ailey school in New York City with a B.F.A. and a minor in communications. Since then, she has appeared in various print ads, TV shows, commercials, music videos and films. She is currently working with Disney Theatrical Productions, touring the world with the Broadway production of The Lion King. #BroadwayConnectionFamily @BwayConnection

For Master Class information: contact Isabelle Cook at 509-927-0972 /isabelle@isabellesdancetime.com

Please fill out and return with payment: Medical Disclaimer for Master Class – "Lion King"

PRINT all information - ONE entry form per person. This Form must be SIGNED & DATED to participate-NO exceptions!

Student Name _____ Age _____ Birthdate _____ / _____ / _____

Address _____

Email _____

Phone Number _____ Studio Name _____

Medical Disclaimer: in consideration of the opportunity to participate in the dance workshop sponsored by the Inland Northwest Dance Association, I, individually or as a Parent/Guardian on behalf of a minor, do hereby waive, release, and discharge any and all rights, demands and claims for damages that I may have against INDA, ITS EMPLOYEES, MEMBERS OR AGENTS, for any and all injuries and losses related to this workshop. I attest and I have full knowledge of the risks involved with dance training and that I assume responsibility for my own medical and emergency expenses in the event of an accident, illness, or other incapacity. I state that I am physically fit and sufficiently trained to participate in the class that I have chosen as offered by this workshop. NO REFUNDS.

SIGNATURE REQUIRED DATE _____

PARTICIPANT (over18) or PARENT/GUARDIAN _____