



Rhythm World 2010 Registration Form

July 26 - August 8, 2010

Lane Alexander, Founder & Director

Fine Arts Building & other Downtown Chicago Locations

TO REGISTER

1. Fill out all personal information fields below and sign participant agreement.
2. Use Page 2 to mark specific class registration.
3. Complete fees worksheet on Page 1.
4. Choose payment method and fill out credit card information if applicable.
5. Fax or mail form to CHRP. You will receive an email confirmation upon receipt.
2936 N. Southport Ave, Chicago, IL, 60657 Fax: 773-439-2527

Full Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Date of Birth: _____

Phone: _____

Email: _____

Emergency Contact Name: _____

Contact's Relationship: _____

Contact's Phone: _____

How did you hear about the festival? _____

FEES WORKSHEET				
Class Registration				
	Early Registration On/Before May 25	Full Price After May 25		Total
1 Residency	<input type="checkbox"/> \$225	<input type="checkbox"/> \$250		
2 Residencies	<input type="checkbox"/> \$425	<input type="checkbox"/> \$475		
3 Residencies	<input type="checkbox"/> \$625	<input type="checkbox"/> \$675		
4 Residencies	<input type="checkbox"/> \$825	<input type="checkbox"/> \$875		
Courses	\$95	\$105	x Total: _____	
Master Classes	\$25	\$30	x Total: _____	
Workshops	\$65	\$75	x Total: _____	
After Work Adults	<input type="checkbox"/> \$115	<input type="checkbox"/> \$125		
Kids Program	<input type="checkbox"/> \$150	<input type="checkbox"/> \$175		
UTEK	<input type="checkbox"/> \$325	<input type="checkbox"/> \$350		
ProTEC	<input type="checkbox"/> \$350	<input type="checkbox"/> \$375		
ATEC	<input type="checkbox"/> \$300	<input type="checkbox"/> \$325		
Registration Fee	\$25	\$25		\$25
Promotion Code: _____			Total Discount: _____	
			TOTAL DUE:	

Participant Agreement

I, _____, am participating in the activities of the Chicago Human Rhythm Project on my accord. Pending any incidents of injury, I release the Chicago Human Rhythm Project, and all its locations, from liability.

Signature of participant or parent/guardian if participant is under 18

Payment Method (check one)

Credit Card (see below) Check enclosed Cash/Money Order enclosed
payable to CHRP

Card Number: _____ Exp: _____

Name on Card: _____ CVV: _____ Type: Visa MC AMEX

Billing Address: _____ Same as above

RESIDENCIES

Monday, July 26
 Tuesday, July 27
 Wednesday, July 28
 Thursday, July 29
 Friday, July 30

Monday 7/26 - Friday 7/30	
10:00am-12:00pm	<input type="checkbox"/> Johnson / Peters
12:30pm-2:30pm	<input type="checkbox"/> Dianne Walker
3:30pm-5:30pm	<input type="checkbox"/> Fernando Barba
6:30pm-8:30pm	<input type="checkbox"/> Derick Grant
Check appropriate box on worksheet	

COURSES

Monday, Aug 2
 Tuesday, Aug 3
 Wednesday, Aug 4
 Thursday, Aug 5

Time	Mon 8/2 - Thurs 8/5			
	Next Step	Advanced	Int/Adv	Intermediate
10:30am-11:50am	<input type="checkbox"/> Ayodele Casel	<input type="checkbox"/> Sam Weber	<input type="checkbox"/> Billy Siegenfeld	<input type="checkbox"/> Randy Skinner
12:00pm-1:20pm	<input type="checkbox"/> Jason Janas	<input type="checkbox"/> Lane Alexander/BAM	<input type="checkbox"/> Bril Barrett	<input type="checkbox"/> Fernando Barba
2:30pm-3:50pm	<input type="checkbox"/> Jason Samuels Smith	<input type="checkbox"/> Sarah Savelli	<input type="checkbox"/> Mark Yonally	<input type="checkbox"/> Dianne Walker
4:00pm-5:20pm	<input type="checkbox"/> Martin "Tre" Dumas	<input type="checkbox"/> Jay Fagan	<input type="checkbox"/> Julie Cartier	<input type="checkbox"/> Jakari Sherman
AFTER WORK ADULT (Tues - Thurs Only)				
		Int/Adv	Intermediate	Fast Beginner
6:00pm-7:15pm		<input type="checkbox"/> Gene Medler	<input type="checkbox"/> Bruno Buarque	<input type="checkbox"/> Idella Reed Davis
Total # of Courses: _____ (Please add this number to fees worksheet)				

WORKSHOPS

Friday, Aug 6

Friday 8/6	
Time	Int/Adv
9:00am-12:30pm	<input type="checkbox"/> Bril Barrett
10:00am-1:30pm	<input type="checkbox"/> Sam Weber
2:00pm-5:30pm	<input type="checkbox"/> Dianne Walker <input type="checkbox"/> Bruno Buarque
Total # of Workshops: _____ (add to worksheet)	

MASTER CLASSES

Saturday, Aug 7

Time	Saturday 8/7			
	Next Step	Advanced	Int/Adv	Intermediate
10:00am-11:20am		<input type="checkbox"/> Jay Fagan		
11:30am-12:50pm	<input type="checkbox"/> Michelle Dorrance	<input type="checkbox"/> Sam Weber		<input type="checkbox"/> Dianne Walker
1:30pm-2:50pm		<input type="checkbox"/> Fernando Barba	<input type="checkbox"/> Dianne Walker	<input type="checkbox"/> Jay Fagan
3:00pm-4:20pm	<input type="checkbox"/> Jason Samuels Smith	<input type="checkbox"/> Ayodele Casel	<input type="checkbox"/> Jakari Sherman	
5:00pm-6:20pm	<input type="checkbox"/> Jason Janas	<input type="checkbox"/> Derick Grant	<input type="checkbox"/> Sarah Savelli	
Sunday 8/8				
9:00am-10:20am	<input type="checkbox"/> Martin "Tre" Dumas	<input type="checkbox"/> Lane Alexander	<input type="checkbox"/> Jessica Chapuis	<input type="checkbox"/> Mark Yonally
10:30am-11:50am	<input type="checkbox"/> Jason Janas	<input type="checkbox"/> Bril Barrett	<input type="checkbox"/> Martin "Tre" Dumas	<input type="checkbox"/> Julie Cartier
12:30pm-1:50pm		<input type="checkbox"/> Mark Yonally	<input type="checkbox"/> Idella Reed Davis	
Total # of Master Classes: _____ (Please add this number to fees worksheet)				

Sunday, Aug 8