



REGISTRATION FORM

Please fill out the form below and return it with your deposit to:

Keith Watson Productions, Inc.

2425 NW 71st Place

Gainesville, FL 32653

352-264-8812

PLEASE MAKE CHECKS PAYABLE TO: KEITH WATSON PRODUCTIONS, INC.

OR VISIT WWW.KEITHWATSONPRODUCTIONS.COM TO PAY WITH CREDIT CARD.

PERFORMER'S NAME: _____

MALE FEMALE

GRADE LEVEL (YOUR CHILD WILL BE ENTERING AS OF FALL 2010): _____

PARENT'S NAME: _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

HOME PHONE NUMBER: _____

MOM'S CELL NUMBER: _____

DAD'S CELL NUMBER: _____

E-MAIL: _____

MY DEPOSIT CHECK FOR \$275 IS ENCLOSED.

I MADE MY \$275 DEPOSIT (PLUS \$12.50 BANK SERVICE CHARGE) ON THE WEBSITE.

*BALANCE OF \$275 IS DUE 2 WEEKS PRIOR TO THE START OF THE ACADEMY.