

# *PURPOSE, PASSION & POSSIBILITY*

## PERFORMANCE LAB

FACILITATED BY: WREN T. BROWN

MONDAY & THURSDAY, 7-10 PM  
INFO@EBONYREP.ORG  
323-964-9766

NATE HOLDEN PERFORMING ARTS CENTER  
4718 WEST WASHINGTON BOULEVARD  
LOS ANGELES, CA 90016

### PERSONAL INFORMATION:

Date \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Address 2 / Apt. No. \_\_\_\_\_

City / State / Zip \_\_\_\_\_

Country \_\_\_\_\_

Phone: Home # \_\_\_\_\_ Cell # \_\_\_\_\_

Work # \_\_\_\_\_

Email \_\_\_\_\_ Gender \_\_\_\_\_

Nickname/Stage Name *(if applicable)* \_\_\_\_\_

### PAYMENT:

- Cash, personal check, cashier's check, money order
  - Please make checks payable to "Ebony Repertory Theatre"
- Credit Card: Amex, Visa, MasterCard, Discover

Registration Fee: \$200.00 *(Non-Refundable)*

#### OFFICE USE ONLY

Date Received:

Date Paid: