



AHLAM ACADEMY OF MIDDLE EASTERN DANCE TEACHER PROGRAM ENROLLMENT FORM

Full Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Texting ok? _____

Email: _____

Previous Non-Belly Dance Experience:

If applicable, please describe styles, etc. If no previous dance experience, write N/A below:

Previous Belly Dance Experience:

If applicable, please describe styles, teachers, etc. If no previous experience, write N/A below:

Previous Teaching Experience:

If applicable, please describe what you taught, for how long, etc. If no previous experience, write N/A below:

Who are some of your favorite dancers: _____

How long have you taken classes at Ahlam Academy / Oriental Phoenix Arts? (years? months?) _____

Read the statement below carefully and check the box:

I understand Ahlam Academy of Middle Eastern Dance/Anna L. Schkade-Siytangco is the copyright owner of all material presented in the AAMED program. I may not teach, nor replicate, in whole or in part, any of the content within the AAMED program, without explicit consent of the copyright owner. If performing any AAMED program content, I promise to credit Anna L. Schkade-Siytangco as the choreographer with a mention in any "performance bio/introduction" and prominently label on any online video presentation.

Sign: _____

Print: _____

Date: _____

Please complete this form and remit to Ahlam Academy / Oriental Phoenix Arts

17310 FM 529 #111 Houston, TX 77095 – OrientalPhoenixArts@gmail.com

You will receive formal confirmation of this enrollment application within 10 days of receipt