

ISADORA DUNCAN



INTERNATIONAL INSTITUTE

*Registration Form*

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zipcode \_\_\_\_\_

Email Address \_\_\_\_\_

Phone (cell) \_\_\_\_\_ (Evening) \_\_\_\_\_

Fax Number \_\_\_\_\_

Program Title \_\_\_\_\_

Date of Program \_\_\_\_\_

General Student     Certificate Program Candidate

Check Enclosed:     Full Payment     Deposit

I would like to pay via PayPal

Billing email address: \_\_\_\_\_

Full Payment                       Deposit

- Please make checks payable to Isadora Duncan International Institute, Inc.
- Full payment is required for Seasonal Enhancers
- \$100 deposit by check is required for Certificate Program Weeks. Full payment required by first day of workshop.

For further information, please call:

Phone (212) 753-0846

Fax (212) 688-8213

e-mail: [info@idii.org](mailto:info@idii.org)

[www.idii.org](http://www.idii.org)

*Kindly Send To:*

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