

STUDENT NAME _____ **PARENT NAME Mom/Dad** _____
BIRTHDATE (m/d/y) _____ **Age** _____ **PARENT CELL PHONE** _____
ADDRESS _____ **PARENT NAME Mom/Dad** _____
CITY _____ **POSTAL CODE** _____ **PARENT CELL PHONE** _____
PRIMARY EMAIL _____ **STUDENT CELL PHONE** _____
SECONDARY EMAIL _____ **ACADEMIC SCHOOL** _____
STUDENT EMAIL _____ **Medical conditions: if applicable please provide details**
HOME PHONE _____ **on reverse**

NEW TO DANCE CO **CURRENT DANCE CO STUDENT** **INFO REMAINS SAME**

To complete registration please provide the following: Signed Dance Co Waiver Form (reverse side)

Registration Term: January 12th - June 10th 2019 Jan - Jun Term Spring Break

Dress Rehearsal/Recital May 22-27, 2018. Please see our website for other important dates.

ARBUTUS / EAST VAN	PROGRAM / CLASS	DAY	TIME

Full financial breakdown will be provided on separate page or by email

GST # 137398657RT

TOTAL FEES _____ including tax
UPON REGISTRATION _____ 1/2 of total payment
MARCH 15TH _____ 1/2 of total payment

Payment by Visa / MC / Cheque / Debit / Cash

Credit Card _____ Expiry _____ Cardholders Name _____

Please read and initial the terms below:

To officially withdraw from a class the parent/legal guardian must complete & submit a Discontinuation Form (available at the office) no later than February 15th. **Verbal notification and non-attendance are not considered automatic withdrawal.** _____

One third of the tuition and registration fee are non-refundable & there are **no refunds on any tuition, costume and performance fees after February 15th.** Costume fees do not include any additional shoe, tight or accessory requirements. Parents/students will be responsible for the cost of these additional items. A performance fee will be charged for each show that your dancer performs in. This non-refundable fee includes two base tickets for the performance (which can be upgraded depending on seating preference) and a digital copy of each show when available. Withdrawals for medical reasons must be accompanied by a valid doctor's note. Medical withdrawals after February 15th will be credited remaining tuition for future classes. **September to December term, Adult, Spring and Summer classes are non-refundable.** Applications to transfer a student to a different class/time, for personal reason, will incur a \$50.00 administration fee per change. _____

Payment arrangements are required at the time of registration. Dance Co is authorized to process payments by credit card or post-dated cheques in accordance with the payment schedule above. Monthly statements and invoices are not provided. As a courtesy, please inform us if your credit card expiration date changes. An administration fee of \$50 will be applied to NSF cheques. Transactions that are not able to process within 2 weeks of the scheduled payment date will be subject to a 2% late payment fee, accrued monthly until paid. _____

Three or more unexplained absences within each term may result in dismissal from class(es). NO REFUNDS WILL BE GIVEN. _____

Dance Co has a set standard dress code policy and it is mandatory for all dancers to wear the prescribed Dance Co uniform to ALL classes. Dance Co maintains strict policy with regards to uniform, conduct & commitment. Please refer to the Dance Co brochure for further details. _____

Cancellation: Dance Co reserves the right to cancel class at any time due to insufficient enrollment. Dance Co reserves the right to have students photographed and used for publicity purposes, unless otherwise notified in writing.

I have read and understood the Dance Co policy and agree to its terms and conditions.

Signed _____ Date _____

Office Use Only:

Profile Index/CC Class \$ AP Attend Grid Email

MARLOWE WINDSOR MENARD DANCE CO.

154-4189 Yew Street, Vancouver, BC & 5780 Fraser Street, Vancouver, BC

Dear Dancers and/or Parent (or Guardian),

We put safety as one of our top priorities and we will strive to ensure each dancer's safety. However, despite precautions, accidents and injuries can occur. By signing this release form, you (meaning the dancer and parent/guardian) assume all risks related to the use of any and all spaces used by Dance Co and agree to release and hold harmless Dance Co, including its teachers and its staff members as well as the facilities used by Dance Co, from any cause of action, claims or demands or any nature whatsoever, now and in the future.

Please read carefully and sign the following waiver form:

Liability Waiver Form

In consideration of me and my child being permitted to participate in Dance Co programs and activities, the undersigned, appreciating any possible dangers, hazards, or injuries inherent in Dance Co programs and activities, hereby assumes the risks and responsibilities surrounding my or my child's participation in the foregoing programs and activities or other activities as an adjunct hereto; and further, I, for myself, my heirs, and personal representatives(s) hereby defend, hold harmless, indemnify, release and forever discharge Dance Co and all its owners, agents, employees and any other staff members from and against any and all claims, demands and actions or causes of actions on account of damage to property or personal injury, which may result in my or my child's participation in such programs and activities during and outside the Dance Co Classes and on the Dance Co premises.

Furthermore, I/we agree to obey the Dance Co Studio and facility rules and take full responsibility for any damage I/we may cause to the Studios and facilities in use by Dance Co. In the event that I/we should observe any unsafe personal conduct or unsafe physical condition during the Classes, I/we agree to report the unsafe conduct or condition to a Staff member as soon as possible.

I/we further understand and agree that I/we give this release freely, voluntarily, and in the consideration of me or my child being granted permission to participate in the Dance Co programs and activities. I/we also agree that this Release and Liability Waiver shall be effective whether or not I/we have in force any policy of insurance to cover me or my child for injuries which may arise from participation in Dance Co studios and activities. If I/we do not have any such policy in effect, then I/we personally assume and agree to pay for the loss or damage occasioned from said activities during the period of my child's participation, and I/we expressly agree not to look to Dance Co. for reimbursement for any such loss or damage.

I/we do agree that Dance Co can obtain the medical care for my child that the staff deems suitable, should it prove to be necessary.

Care Card #: _____

Family Doctor's Name and #: _____

Medical Conditions: (Please list all health concerns, learning disabilities, injuries or allergies)

I/we do hereby unconditionally release and forever discharge any and all claims, demands, actions, and causes of action whatsoever arising from, or in any manner connected with, or growing out of the use in any manner whatsoever, of the pictures and sound of me taken by Dance Co for internal or external use coverage/production, internal or external media, including but not limited to publications, website, videos, and presentations.

PARTICIPANT NAME: _____

PARENT/GUARDIAN NAME: _____

SIGNATURE: _____ DATE: _____

(To be signed by participants 18 years of age or older, otherwise your parent or guardian must sign)