

Aspire Dance Academy

Phone: (250) 489-4257, Email: aspiredance@telus.net

Website: www.aspiredance.ca

Registration Form 2011/2012 Season (Please keep this receipt for your "Fitness Tax Credit")

One form per family:

Family Surname: _____ First Name/s: _____

Age/s: _____ Birthdate/s: _____ (month/day/year)

Name of Parents/Guardians: _____

Mailing Address: _____

Postal Code: _____

Home Phone: _____ Work Phone: _____

Email Address: _____

Emergency Contact Name: _____ Phone: _____

Medical Concerns: _____

<u>Class</u>	<u>Day/Time</u>	<u>Length</u>	<u>Cost</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Payment:

- post-dated cheques (dated on the 15th of every month) Cheque #'s: _____
 2 post-dated cheques (Sept 15th & Feb 15th) Registration Fee: Single Family
 payment in full Cash Cheque
(Cheques payable to Aspire Dance Academy)

Cancellation Policy:

I (we) the undersigned understand and agree to the cancellation/refund policy. (First and last cheques are not refundable and one month's notice must be given in writing. Sessional classes will not be refunded after the second class. Costume deposits will not be refunded after December 1st, 2011.)

Waiver of Liability:

In consideration of myself or my child, I (we) the undersigned hereby, both for myself and my heirs, executors and administrators, forever waive, release and discharge any and all claims for damages and causes of suit or action (whether of personal injury, death, illness, or for negligence) which may result from my or my child's participation or attendance in class, against Michelle Navratil, the facility, its employees and agents, and other participants in the class.

Sign: _____ Date: _____