

Dance Registration Form - 3 Year Old Mini Dance Program

Student Name: _____ Date of Birth _____ Age _____

Mother: _____ Father _____

Address _____

_____ City _____ Prov _____ Postal Code _____

Phone (Home) _____ Work _____ Cell _____

Email _____

Allergies/Medical /Learning Issues: _____

How did you hear about us? _____

Registration secures a space in class. Tuition is payable by cash or cheque to Karin Hobby Dance Academy Inc.

\$25 of tuition fees are non refundable prior to the commencement of the session. The remainder of tuition for the session is non refundable once the session has commenced. Cheques for the initial payment cannot be post-dated. There is a \$25 fee for returned cheques. Transfers will only be permitted when space and level of training allows. Please read the handbook for full details.

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Full session fees: \$ __100.00__ 2nd session fees: \$ _____ 3rd session fees: \$ _____

Add 13% HST \$ __13.00__ Add 13% HST \$ _____ Add 13% HST \$ _____

Total \$ __113.00__ **Total** \$ _____ **Total** \$ _____

Cheque Number _____ Cheque Number _____ Cheque Number _____

Inv rct pd Inv rct pd Inv rct pd

Start/End Date: 1 _____ **2** _____ **3** _____**Day and time** _____**Waiver Agreement.**

I understand that there will be some costume fees for the end of year show. In addition, I have read the student/parent handbook and agree to the conditions outlined therein. I hereby consent to my child being photographed and or videotaped in school performances by photographers assigned by the school. These photographs may be used for KHDA promotional displays and school related functions. I respect that my own photographing of other KHDA students is not permitted without their own consent both in class and in performance. Video recording or other recording of KHDA performances are not permitted due to copyright laws. I acknowledge that dance is a physical activity and the potential risk for physical injury does exist. Our goal is to minimise this risk however not all injuries are preventable. Acknowledging this, I will not hold KHDA, its faculty, staff, volunteers or venues responsible for any injuries which do occur. I understand that failure to abide by the conditions of enrolment may result in discontinuation of studies at KHDA and forfeiture of the remainder of paid tuition. Any concerns I have will be brought forward to school staff. Positive feedback is also welcome!

Parent/Guardian Signature _____ Date _____