



- Classical Ballet
- Jazz
- Acrobatics
- Hip Hop
- Modern

2011 - SUMMER CAMP REGISTRATION FORM

General Information

Mother's Name: _____ Cell Phone No.: () _____

Father's Name: _____ Cell Phone No.: () _____

Street Name and Number: _____ Unit: _____

City: _____ Province: ON Postal Code: _____ Home Phone No.: () _____

Email: _____ Alternate e-mail: _____

Emergency Contact (other than Parents): _____

Relationship: _____ Cell Phone No.: () _____

Student's General Information

Name: _____ DOB: _____ Age: _____ Female Male

Medical Conditions: _____

Please Check off your preference:

WEEKS	EARLY BIRD FEES - by June 1 st -	REGULAR FEES - after June 1 st -	DATES
ONE WEEK			
AM <input type="checkbox"/> PM <input type="checkbox"/>	HALF DAY - \$112 (+ tax) <input type="checkbox"/>	HALF DAY - \$129 (+ tax) <input type="checkbox"/>	July 11 – 15 <input type="checkbox"/>
	FULL DAY - \$224 (+ tax) <input type="checkbox"/>	FULL DAY - \$259 (+ tax) <input type="checkbox"/>	July 18 – 22 <input type="checkbox"/>
TWO WEEKS			
AM <input type="checkbox"/> PM <input type="checkbox"/>	HALF DAY - \$198 (+ tax) <input type="checkbox"/>	HALF DAY - \$215 (+ tax) <input type="checkbox"/>	August 08 – 12 <input type="checkbox"/>
	FULL DAY - \$396 (+ tax) <input type="checkbox"/>	FULL DAY - \$431 (+ tax) <input type="checkbox"/>	August 15 - 19 <input type="checkbox"/>
THREE WEEKS			
AM <input type="checkbox"/> PM <input type="checkbox"/>	HALF DAY - \$300 (+ tax) <input type="checkbox"/>	HALF DAY - \$319 (+ tax) <input type="checkbox"/>	
	FULL DAY - \$600 (+ tax) <input type="checkbox"/>	FULL DAY - \$638 (+ tax) <input type="checkbox"/>	
FOUR WEEKS			
AM <input type="checkbox"/> PM <input type="checkbox"/>	HALF DAY - \$399 (+ tax) <input type="checkbox"/>	HALF DAY - \$420 (+ tax) <input type="checkbox"/>	
	FULL DAY - \$699 (+ tax) <input type="checkbox"/>	FULL DAY - \$720 (+ tax) <input type="checkbox"/>	

- **Please note priority will be given to those who register for full day program.**
- Please read and sign the registration agreement on the back of this page

FOR OFFICE USE ONLY

Amount to be paid \$ _____ Cash Cheque No. _____



LIABILITY and MEDICAL RELEASE: The dancer and parents accept responsibility for possible risk of injury, and holds Center Stage School of the Arts blameless in the event of injury before, during or after class, both within and outside the premises. Center Stage School of the Arts is authorized that in the event of an injury and an inability to reach the parents, to seek emergency medical assistance for the dancer.

TERMS and CONDITIONS

- 1) **Cancellation, Withdrawal, and Refunds:** None unless it is solicited before July 1st
- 2) **Returned Cheques:** It is agreed that in the event that any cheques made payable to Center Stage School of the Arts are returned by the Bank for any reason, the parent agrees to pay Center Stage School of the Arts a \$25.00 service charge for handling the cheque. The funds then owed to Center Stage School of the Arts shall become payable immediately.

Center Stage School of the Arts is committed to provide the best possible instruction. This fine quality allows your dancer to progress technically to the best of his or her abilities, in a professional environment. In striving to his or her personal best, we aim to maximize the dancer's enjoyment of dance, and to foster a well-rounded appreciation of the arts.

We thank you for your commitment, with your registration and support of Center Stage School of the Arts.

Parent's Signature: _____

Date: _____