



Summerland School of Dance

Registration Form 2011/12

Parent(s) name, address, phone # and email: _____

Alternate Emergency Phone Number: _____

Student Information:

1st Student		Please send the upper portion of this registration form with payment to:	
Name		<i>10817 Dunham Cres</i>	
Birthdate (dd/mm/yr)		<i>Summerland, BC</i>	
Age Today		<i>V0H 1Z2 or Scan and send via email</i>	
Allergies/Special Needs		<i>eva@summerlanddance.ca</i>	
Class(es)/Day/Time		<i>or drop off at studio through mail slot.</i>	
2nd Student			
Name			
Birthdate (dd/mm/yr)			
Age Today			
Allergies/Special Needs			
Class(es)/Day/Time			



Dress Requirements

Pre-school/Pre-Primary Ballet-

Pink body suit, pink tights or white socks, pink slipperettes or ballet slippers, chiffon skirt optional.

Ballet -

Black body suit, "ballet" pink tights, booty shorts are O.K., ballet slippers.

(No skirts 6+).

Jazz -

Black jazz pants, capri's or skort black top, black jazz shoes. No Logos please!!

Tap - NO JEANS

Black jazz pants, skirt or shorts and black top. Black flat tap shoes.

Hip Hop/Musical Theatre - NO JEANS

Hip hop style clothes, easy to move in, Clean Runners. Black Jazz Shoes for Musical Theatre.

Modern/Creative Dance/Acrodance -

Black jazz pants, capri's, black top, bare feet or cotton socks.

Students are to wear proper attire and hair has to be neat, tied back and off face.

No bracelets, watches, necklaces, dangly earrings**

Label clothing and shoes please. Parents please help us by ensuring students are presentable for classes,

Thank you.

Waiver Form

New Students must have this waiver form signed and submitted to be able to participate in any activities held at Summerland School of Dance Studio.

THE FOLLOWING DESCRIBES THE TERMS ON WHICH SUMMERLAND SCHOOL OF DANCE OFFERS YOU OR YOUR CHILD (CHILDREN) ACCESS TO OUR SERVICES.

I wish to participate or give permission to my child (children) in a dance class(es) at Summerland School of Dance. As a condition of Summerland School of Dance agreeing to allow me or my child (children) to participate in any dance class, I hereby confirm and agree to the following:

1. I recognize that the dance classes of the type I intend to participate in or my child (children) at Summerland School of Dance require physical exertion which may be strenuous and may cause physical injury, and I am fully aware of the risks and hazards involved.
2. I understand that it is my responsibility to consult a physician prior to and regarding my participation or my child (children) in any classes I attend at Summerland School of Dance. I represent that I or my child (children) is physically fit and have no medical condition that would prevent full participation in any dance class.
3. I agree to take full responsibility for me or my child (children) any risks, injuries or damages known or unknown which incur, or may incur, as a result of participation in any dance class at Summerland School of Dance.
4. I knowingly and voluntarily waive any and all claims I have, or may at any time in the future have, against Summerland School of Dance or any of the instructors, or employees, for any injury or damage that I sustain or my child (children) sustain as a result of participation in a dance class(es) at Summerland School of Dance.

(Please name all children under 18 that will be participating)

Name(s): _____

Signature of Parent if participant(s) is under 18. _____ Date: _____

Print Name: _____ Signature: _____ Date: _____

Witness: _____ Signature: _____ Date: _____