



## Registration Form - MINI Classes

### Personal Information:

Family Name: \_\_\_\_\_ Given Name: \_\_\_\_\_

Address: \_\_\_\_\_

Home Ph#: \_\_\_\_\_

Birthdate: (MM-DD-YYYY): \_\_\_\_\_

Parents/Guardian's name: \_\_\_\_\_ Work Ph#: \_\_\_\_\_ Cell #: \_\_\_\_\_

Parent's/Guardian's name: \_\_\_\_\_ Work Ph#: \_\_\_\_\_ Cell #: \_\_\_\_\_

Parent Email (Billing & Info Emails): \_\_\_\_\_

Dancer Email (Info Emails): \_\_\_\_\_

### Photographs/Publicity/Website: (please initial each box)

I agree that my child's name and photo may be used for promotional materials and on the AIM website or social media.

### Waiver:

I agree that Art in Motion Dance Studio shall not be liable for any accident or injury of whatever nature or sort whether resulting directly or indirectly from any activities on our premises or otherwise, regardless of cause, unless due to gross negligence on the part of Art in Motion Dance and shall not be liable for any loss or damage whether by theft or otherwise to any articles belonging to any person brought onto our premises.

### Refund Policy:

The fees for these classes are non-refundable unless an injury/illness is accompanied by a doctor's note.

### NSF Cheques:

There will be a \$42.00 fee for all NSF Cheques.

### Mini Classes:

Costs are \$125 for one class, \$160 for two classes, \$200 for all three classes per session. 10% off if you register for both sessions at one time. (GST will be added to above fees)

Tap       Ballet       Jazz

Session One: September 24 – November 26, 2024 – 10 sessions

Session Two: January 7 – March 11, 2025 – 10 sessions

### Payment Information:

# of Classes: \_\_\_\_\_ # of Sessions: \_\_\_\_\_

**Total Fees: \$** \_\_\_\_\_

**Registration Fee: \$** \_\_\_\_\_ *\$20.00 (with GST \$21.00)*

**Insurance Fee: \$** \_\_\_\_\_ *\$45.00 (with GST \$47.25)*

### Payment Options:

1 - Full Payment: \_\_\_\_\_

2 - 3 Equal Payments: (dated for the Sep 1<sup>st</sup>, Oct 1 and Nov 1<sup>st</sup> and Jan 1<sup>st</sup>, Feb 1<sup>st</sup>, Mar 1<sup>st</sup>) \$ \_\_\_\_\_

**Payment Method:**  Cash    EMT    PAP    Cheque - # \_\_\_\_\_, # \_\_\_\_\_, # \_\_\_\_\_