



BreatheGirls

Program Registration – Happy Minds (Winter 2020)

(One form per member)

Please Complete and email a scanned version of the completed document to:
breatheleaside@gmail.com

Member Information

Please provide the following information for each participating member (child)

Name:	
Street Address:	
Address line 2:	
Province:	
Postal Code:	
City:	
Date of Birth:	
School Name:	
Grade:	
Medications:	
Allergies:	
Special Needs/Physical Limitations/Other Notes:	

Parent/Guardian Contacts

Required contact information for parents and/or guardians of members

Contact #1 Name:	
Relationship to Member:	
Primary/Cell Phone:	
Work Phone:	
Home Phone:	
Email Address:	

Contact #2 Name:	
Relationship to Member:	
Primary/Cell Phone:	
Work Phone:	
Home Phone:	
Email Address:	

Emergency Contact

This person must be available during program hours via at least one of the provided phone numbers.

Same as Parent/Guardian Contact #1 above (Yes/No):	
Same as Parent/Guardian Contact #2 above (Yes/No):	
Name of Emergency Contact other than #1 or 2 :	
Relationship to Member:	
Primary/Cell Phone:	
Work Phone:	
Home Phone:	
Email Address:	

Additional Pick-Up Permission

All contacts above are identified to have Permission to Pick-Up. List anyone else who you also wish to approve for child Pick-Up in addition to Parent/Guardian Contacts & Emergency Contact.

Name:	
Relationship to Member:	
Primary/Cell Phone:	

Name:	
Relationship to Member:	
Primary/Cell Phone:	

Name:	
Relationship to Member:	
Primary/Cell Phone:	

Happy Minds Rate Schedule

Winter 2020

Tuesdays 4:00 pm - 6:00 pm

Once-A-Week

\$400 (+HST)

Tuesdays

January 14 – March 10, 2020

Payment

Credit Card Mastercard or VISA	Card #	Exp: MM/YY
E-Mail Money Transfer	Please Send to breatheleaside@gmail.com and use Happy Minds	

Terms & Conditions

Conduct

Breathe Girls Inc. is committed to creating an environment that is safe, non-competitive and committed to the overall well-being of all its participants and staff. We ask our participants to be their best, nurturing attitudes of mutual respect and cooperation. With an emphasis on personal accomplishment at one's own pace and skill level, we share and celebrate our successes to strengthen positive mental state and create a foundation for a fit and active life. As a part of this commitment, Breathe Girls Inc. requires its participants, team/staff, parents, etc. to treat one another with courtesy, respect, and fairness.

The following behaviour by participants, their parents, friends or any others will not be tolerated and will lead to dismissal of the participants from the program offered by Breathe Girls Inc., including but not limited to:

1. Any act that violates federal, provincial or municipal laws or by-laws, or any violation of the Breathe Girls Inc.'s policies and procedures.
2. Gross misconduct, inappropriate horseplay, theft, fighting, or any behaviour which may lead to property damage or which may affect the safety and wellbeing of others.
3. Willful destruction of property (including that caused by inappropriate horseplay, fighting, etc.).
4. Disregard of the team member's instructions during the program, being abusive, belligerent or in any way compromising the safety of, delivery of instruction to, or the enjoyment of the program by other participants.

Payment & Cancellation

Payment in full is considered due at time of registration. Spot(s) in class are not guaranteed until payment is processed. We are, however, also happy to work with you on payment installment plans, on request and as agreed upon by both parties. Contact us for details. Late registrations are accepted if space permits. \$40 fee is charged on all NSF payments. Preferred payment methods are Interac email transfer, cheque or credit card.

In case of class participation being cancelled for medical reasons, and when accompanied by a doctor's note, pro-rated refund of all whole missed classes will be processed minus a \$50 admin fee. For withdrawal from class for non-medical reasons prior to start of term and with minimum 7 days' notice before term begins, refund will be processed in full minus a \$50 admin fee. Refunds are not issued for non-medical withdrawal once a program begins or within 7 days immediately prior to the start of the term.

You may switch to a different class day and/or time once you have registered, granted space is available. No refund shall be provided in the event of dismissal for breach of the Conduct Policy.

Anti-Spam & Privacy

I give my express consent to receive emails from Breathe Girls Inc. regarding their programs, camps, events, promotions, and any other new or relevant information pertaining to its operations. I understand that I can withdraw my consent at any time. We never share your email address, or any other personal details, with anyone! (Should you wish to opt-out of receiving emails effective immediately, simply send an email to breatheleaside@gmail.com and we will remove you from our email distribution list.)

Photo/Video

I give permission for my son/daughter's photographs/videos to be used for publicity and advertising by Breathe Girls Inc., unless I expressly indicate otherwise. (Should you wish to opt-out of photo/video permission, simply send an email to breatheleaside@gmail.com)

Consent of Treatment

Should it be necessary, in the opinion of a staff member of Breathe Girls Inc. to render first aid or assistance to the participant(s) listed above, I hereby grant permission to the staff of Breathe Girls Inc. and other medical personnel to render such aid or assistance as they may deem necessary. I have carefully read this consent for treatment of a minor and fully understand its contents. I understand and agree that, in the case of an emergency Breathe Girls Inc. assumes no responsibility or obligations relative to any cost or expense related to carrying out any emergency procedures and/or emergency transportation for myself or my child.

Assumption of Risks

I acknowledge that activities offered at Breathe Girls Inc., may involve an element of risk, which may result in bodily injury (including the risk of severe or fatal injury) to myself or my child/ward. I confirm that I, or my child, am/is fit to participate in activities.

Release of Liability

I, for myself and, if applicable, my child/ward, and each of our respective heirs, executors, administrators and assigns, release Breathe Girls Inc. and its servants, agents, directors, officers and employees (collectively "BGI") from any claims, demands, damages, actions or causes of actions arising out of or in consequence of any loss, injury or damage to my person or property (or, if applicable, to my child's / ward's person or property) incurred while attending at or participating in any activities offered at BGI, notwithstanding any such loss, injury or damage may have arisen by reason of the negligence of BGI or any person for whom it is at law responsible.

I have read the conduct policy, payment & cancellation policy, anti-spam policy, photo/video policy, consent of treatment, assumption of risks, and release of liability, fully understand its terms, and understand that I am giving up substantial rights, including my right to sue. I also acknowledge that I am unaware of any physical or mental condition or impediment, which would prevent or hinder myself or my child from participating safely in the programs at Breathe Girls Inc. I confirm that I have accurately

reported and disclosed any medical information (physical and mental) to Breathe Girls Inc., which is necessary for the proper program involvement and care of the above-mentioned participants.

I acknowledge that I am agreeing to these terms and conditions freely and voluntarily, and intend by my agreement for this to be a complete and unconditional release of all liability to the greatest extent allowed by law. I, as the parent/guardian of the minor participant(s), have explained to my son/daughter(s) the aforementioned stipulated conditions and their ramifications, and I consent to their participation in the programs conducted under by Breathe Girls Inc.

I have read and agree to the Terms & Conditions

Parent or Guardian Signature

Date