



Barondale P.S. Drop-In Dance Program Registration Form Presented by

THE OLOGIST FACTORY INC.

Please complete this form to register for the drop-in dance program at Barondale P.S. This program is open to students in grades 3-5.

Program Details:

- **Dates:** Every Wednesday, starting May 14th
- **Time:** Morning Nutrition Break
- **Location:** Barondale P.S.
- **Cost:** \$8.00 per day

Student Information

- Student's Full Name: _____
- Grade: _____
- Age: _____
- Teacher's Name: _____

Parent/Guardian Information

- Parent/Guardian Full Name: _____
- Phone Number: _____
- Email Address: _____

Emergency Contact Information (Other than Parent/Guardian)

- Contact Name: _____
- Phone Number: _____
- Relationship to Student: _____

Medical Information

- Please list any allergies or medical conditions we should be aware of: _____
- Are there any physical limitations or injuries we should know about? _____
- Health Card Number: _____



Program Participation

- My child will be participating in the drop-in dance program on the following Wednesdays (check all that apply):
 - May 14th
 - May 21st
 - May 28th
 - June 4th

Fees and Payment

- Number of Days Attending: [4]
- Total Amount Due: [4] (Number of Days x \$8.00)
- Total Amount Due: \$32.00
- Payment Method:
 - Cash (Please bring exact change)
 - Online Payment (Details will be provided by the school)

Waiver and Release

I, the undersigned, hereby release The Ologist Factory Inc and Barondale P.S., its staff, and volunteers from any and all liability for any injury or damage arising out of or in connection with my child's participation in the drop-in dance program. I acknowledge that I have read and understand the program details and agree to allow my child to participate.

- I have read and agree to the above waiver and release.
- Signature (Parent/Guardian): _____
- Print Name: _____
- Date: _____

Additional Comments/Questions:

Office Use Only:

- Date Received:
- Amount Paid:
- Payment Method:
- Days Confirmed:
- Notes: