

Please check day and length of class.

<p>Acro Time: _____</p> <p><input type="checkbox"/> Wednesday <input type="checkbox"/> 1 Hour</p>	<p>Ballet Time: _____</p> <p><input type="checkbox"/> Monday <input type="checkbox"/> 45 Min <input type="checkbox"/> Tuesday <input type="checkbox"/> 1 Hour <input type="checkbox"/> Wednesday <input type="checkbox"/> 1 Hour 30 mins (no pointe) <input type="checkbox"/> Thursday <input type="checkbox"/> 2 Hour (with pointe)</p>
<p>Lyrical Time: _____</p> <p><input type="checkbox"/> Monday <input type="checkbox"/> 1 Hour</p>	<p>Pointe Time: _____</p> <p><input type="checkbox"/> Wednesday <input type="checkbox"/> 45 Min</p>
<p>Creative or Combo Time: _____</p> <p><input type="checkbox"/> Tuesday <input type="checkbox"/> 30 Min. <input type="checkbox"/> Thursday <input type="checkbox"/> 45 Min</p>	<p>Contemporary Time: _____</p> <p><input type="checkbox"/> Tuesday <input type="checkbox"/> 1 hour</p>
<p>Hip Hop Time: _____</p> <p><input type="checkbox"/> Monday <input type="checkbox"/> 30 Min. <input type="checkbox"/> Tuesday <input type="checkbox"/> 45 Min <input type="checkbox"/> Wednesday <input type="checkbox"/> 1 Hour</p>	<p>Jazz Time: _____</p> <p><input type="checkbox"/> Tuesday <input type="checkbox"/> 45 Min <input type="checkbox"/> Wednesday <input type="checkbox"/> 1 Hour <input type="checkbox"/> Thursday</p>
<p>Performance Group Time: _____</p> <p><input type="checkbox"/> Thursday <input type="checkbox"/> 2 Hours <input type="checkbox"/> Friday</p>	<p>Musical Theatre Time: _____</p> <p><input type="checkbox"/> Tuesday <input type="checkbox"/> 45 Min</p>
<p><input type="checkbox"/> Adult Tap/Fitness <input type="checkbox"/> Dance With Me <input type="checkbox"/> Stretch/Conditioning/PBT</p>	<p>Tap Time: _____</p> <p><input type="checkbox"/> Monday <input type="checkbox"/> 45 Min <input type="checkbox"/> Wednesday <input type="checkbox"/> 1 Hour</p>

Penhold School of Dance

Registration form

1227 Fleming Avenue

Penhold, AB

Owner/Instructor Kirsten Kowalchuk

403-573-2002

office@penholdschoolofdance.com

NAME OF STUDENT _____
AGE OF STUDENT _____
BIRTHDAY ____/____/____
YEARS OF DANCE EXPERIENCE _____
SCHOOL GRADE ENTERING IN SEPT _____
CONTACT PERSON _____
MAILING ADDRESS _____
E-MAIL (print clearly) _____
HOME PHONE _____
CELL PHONE _____

Waiver

Parents, legal guardians of minor students and adult students waive the right to any legal action for any injury sustained resulting from normal dance activity or any other activity conducted by the students before, during or after class time. I do hereby release, absolve, indemnify and save harmless Penhold School of Dance Ltd, their staff, instructors, and all of them from any claim which I may have as a result of my or my child's participation. I do assume all risks and hazards incidental to this activity and hereby waive all claims which I may have against the above organization or individuals. The above clause is applicable to in studio as well as online dance classes.

- PHOTO RELEASE: The studio is hereby granted permission to take photographs or video of the students to use in brochures, websites, posters, advertisements and other promotional materials the studio creates during in studio or online dance classes.

- I give permission to share my email address with Pointe Parent Council.

Signature _____ Date _____

Please be aware of the studio policy for late payments. If payment is not kept up to date on class fees, the studio has the right to withhold costumes and/or photos until payment has been made.