



Registration

Ultimate Dance Company #19, 4948 126 Ave SE Calgary, Alberta
 ph: 403-251-6472 www.ultimatedanceco.com email: director@ultimatedanceco.com

		Today's Date	Staff Initial
Student Name		Mother's Name	
Birth date (m/d/y)	Age	Work Phone	
Home Phone		Cell Phone	
Address		Father's Name	
City		Work Phone	
Postal Code		Cell Phone	
Dance Experience		Referred by	
Email			

I will receive all newsletters, class registration, etc. via E-mail YES/NO

Medical Information

Summer Camp: ____ Camp Dates: _____ Social Latin: ____ Session Dates: _____

Class	Day	Time	Class Length	Tuition

Payment	Due Date	Method of Payment	Amount	Amount Paid	Staff Initial:
Sept Fees & Reg Fee	Due Upon Registration	Cheque/Cash	\$		
Oct-June	Post Dated Cheques for the 1 st of each month 200	Cheques Only	\$		

Business Number: GST 890823248 RT 0001

Acknowledgement of Risk - Please read thoroughly before signing and submitting
 The applicant agrees that Ultimate Dance Company and/ or its directors, instructors, or other staff, will not be held responsible for any accident, injury or loss however caused and agrees to release Ultimate Dance Company from all claims which may arise as a result of, or by reason of, such accidents or loss. All participants will be held for damage to property or equipment. We reserve the right to request any participant to withdraw from the program prior to its' termination if the applicant is not acting in the required manner. I hereby give permission to Ultimate Dance Company to use photographs for the communication and promotion of the dance studio and website. I have read and understood Ultimate Dance Company's policies and I agree to the terms and conditions.

Signed _____ Date _____