



**TORONTO
SCHOOL of
BALLET**

New Student REGISTRATION FORM 2018-2019

Registration Fee, MOP/Postdated Cheques and Completed Privacy Form must accompany this form

DANCER INFORMATION:

Dancer's name: _____

Date of Birth: _____

Address: _____

City: _____ Postal Code: _____

Allergies: (if any) _____ Medication: _____

PARENT/GUARDIAN INFORMATION:

Primary Contact & Relationship to Dancer: _____

Home Number: _____ Email: _____

Cell: _____ Work #: _____

Secondary Contact & Relationship to Dancer: _____

Home Number: _____ Email: _____

Cell: _____ Work #: _____

EMERGENCY CONTACT:

Name of Emergency Contact: _____

Relationship to the Dancer: _____

Home Number: _____

Cell: _____

CLASSES ENROLLING IN:

CLASS	DAY	TIME

FEES/PAYMENT:

- * Registration fee: \$25.00 per NEW family to our full year program. This includes students/families who attended classes in the summer but were not at the Toronto School of Ballet in the 2017-2018 season.
- * Fees Payable by Cash, Cheque, Debit or Credit
- * If paying monthly (available for the Pre-Professional Program only) Postdated Cheques must accompany this Registration Form

Fee Schedule based on Payment Options:

One time Payment: due at time of Registration

3 Payments: Fees due: upon registration, November 24th, 2018, March 9th, 2019

NO Refunds will be issued on or after October 1st, 2018. Fees are NON-Transferable.

*In the event a student decides to withdraw before October 1st, 2018, **NO Refunds** will be issued for classes which the student has already taken.*

***NO Refunds** will be issued for classes missed by the student.*

- * In the event the Toronto School of Ballet cancels classes due to inclement weather or an emergency situation, the Toronto School of Ballet will provide make-up classes for those classes cancelled but will not issue refunds for those classes cancelled. Every effort will be made to provide dancers and parents with suitable dates and time for the make-up classes.

REGISTRATION

*** Registration is not considered complete until:**

- 1) The registration form is complete and registration fee is processed.
- 3) All cheques are received and dated correctly.
- 4) The waiver form is signed and received.

*Please make all cheques payable to: **Toronto School of Ballet Inc.***

****Note:** A fee of **\$30.00** will be charged on all cheques returned **N.S.F.***

PLEASE READ AND SIGN THE FOLLOWING WAIVER:

I hereby assume all of the risks arising out of, incidental to, or in any way connected with my child's participation in dancing lessons provided by the Toronto School of Ballet Inc. and its teachers or agents, including, but not limited to, any risks which are not foreseeable.

I hereby release the Toronto School of Ballet Inc. and all its officers, directors, employees, including teachers and supervisors from any and all liability and any and all claims arising out of, incidental to, or in any way connected with me or my child's participation in any lessons, competitions, and/or performances.

I (we) consent to the participation of the student named below in these lessons. I (we) make the acknowledgements, assume the risks and responsibilities and release the above named school and teachers in accordance with this release, acknowledgement and assumption of risk for and on behalf of myself and the student named below.

I agree and understand that **ALL** payments once processed are **NON-REFUNDABLE** and **NON-TRANSFERABLE**.

I hereby acknowledge the terms and conditions and the rules and regulations stated in this form and will adhere to them. I also acknowledge and agree to the administration fees and NSF fees, when applicable.

I acknowledge that I have read and received the Policies and Dress Code and Privacy Act information.

Name of Student:

_____ Date: _____

Name of Parent / Guardian: **(Please Print)**

_____ Date: _____

Signature of Parent/Guardian:

_____ Date: _____

FOR OFFICE USE ONLY:

DANCE PROGRAM:

RECREATIONAL PRE-PROFESSIONAL (indicate Program): _____

Family Registration Fee Received: Y N n/a MOP _____

Privacy Form Signed and Received: Y N Date: _____

Preferred Payment Structure:

FULL: MOP: _____ Date: _____ Rec'd: _____ Amount: \$ _____

3 TERMS:

MOP: _____ Date: _____ Rec'd: _____ Amount: \$ _____

MOP: _____ Date: _____ Rec'd: _____ Amount: \$ _____

MOP: _____ Date: _____ Rec'd: _____ Amount: \$ _____