

*Alive Danceworks Ltd.*

4251 Bow Trail SW, Calgary AB T3C 2G1  
Phone: (403) 246-5511 Fax: (403) 217-5186  
#1005 – 873 – 85<sup>th</sup> St SW, Calgary AB T3H 0J5  
Phone: (403) 246-4488  
[www.alivedanceworks.com](http://www.alivedanceworks.com)

**REGISTRATION FORM**

**Dancing at 85<sup>th</sup> Street only? (pls circle yes if you are) YES**

**STUDENT’S NAME:** \_\_\_\_\_ **Age:** \_\_\_\_\_

**DATE OF BIRTH:** \_\_\_\_\_ **EMAIL:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**POSTAL CODE:** \_\_\_\_\_ **HOME PHONE #**( ) \_\_\_\_\_ - \_\_\_\_\_

**PARENT/GUARDIAN CELL #**( ) \_\_\_\_\_ - \_\_\_\_\_

\*I release my contact info to Alive Danceworks (to distribute class phone lists)

**Initial:** \_\_\_\_\_

**EXPERIENCE:**

**PREVIOUS DANCE SCHOOL:** \_\_\_\_\_

**YEARS OF EXPERIENCE:** \_\_\_\_\_

**WHAT STYLES:** \_\_\_\_\_

**PARENT/GUARDIAN INFORMATION**

**FATHER’S NAME:** \_\_\_\_\_

(first and last name please)

**MOTHER’S NAME:** \_\_\_\_\_

(first and last name please)

**EMERGENCY CONTACT (not the parent/guardian)**

**NAME:** \_\_\_\_\_

**RELATIONSHIP:** \_\_\_\_\_

**PHONE #**( ) \_\_\_\_\_ - \_\_\_\_\_

**PERMISSION/LIABILITY**

I grant permission for my child, \_\_\_\_\_, to participate in all forms of dance activities during the 2009/2010 season at Alive Danceworks Ltd. I will not hold Alive Danceworks Ltd, staff or landlord responsible for any accidents which may occur in conjunction with these activities.

**\*\*I am also understanding that there are no refunds after the term begins.**

**MEDICAL WAIVER**

I authorize the adult in charge of Alive Danceworks Ltd. classes to arrange and grant permission to appropriate medical authorities for health care as he/she deems necessary for the well being of my child.

**MedicalConcerns/Information:** \_\_\_\_\_

**Parent/Guardian Name:** (please print) \_\_\_\_\_

**Parent/Guardian Signature:** \_\_\_\_\_

## **DESIRED CLASSES**

**TYPE**

**DAY**

**TIME**

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\*Alive Danceworks Ltd. reserves the right to cancel classes if they do not fill with required student numbers. You will be notified before the term begins if your desired classes will not be running. Please feel free to check on your class number at any time by calling (403) 246-5511.

\*NOTE: with this in mind...most of our classes do fill quickly ☺

\* Alive Danceworks Ltd. reserves the right to cancel classes due to bad weather, holidays and/or low student attendance. Make up classes are encouraged. Please see the front desk if you wish to take a make up class.

\*NOTE: please see our calendar for holidays and important dates

## **PERFORMANCE 2010**

I understand that students participating in term 2 classes will be part of our year end production. A mandatory non-refundable fee of \$45 (one term 2 class) and \$5 for each additional class is due at the time of 2010 registration OR due at the time of September registration if the entire year's payment is provided before/in the Fall term. This fee covers costume rental, cleaning, lights and sound for the show, extra rehearsal/spacing time at the theatre and security. We pre-sell each family 2 tickets to the Year End Show. The tickets are paid for at the time of term 2 Registration. Remaining tickets usually go on sale in April. The show is an exciting experience for all and is a great opportunity for the students to showcase what they have learned during the year.

Parent/Guardian Signature: \_\_\_\_\_

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## **Recreational Program – Payment Terms**

\*Monthly payments accepted – post-dated cheques or an on-file VISA or MASTERCARD accepted. No month to month payments. We ask for authorization to process ALL of the monthly payments once the term begins, as there are no refunds.

*\*If paying monthly – processing fee of \$20/term*

**\*NO REFUNDS after the term begins**

\*A \$20/student or \$30/family non-refundable registration fee is charged at the time of 2009/2010 registration

\*A \$25 fee is charged on all NSF cheques

\*Recreational students taking class(es) in the second term pay a \$45 performance fee (1 class) and \$5 for each additional class

**PAYMENT METHODS: VISA/M.C/DEBIT/CASH/CHQ(S)**

Parent/Guardian Signature: \_\_\_\_\_