



2007 Registration

Student Last Name \_\_\_\_\_ First Name(s) \_\_\_\_\_

Birth Date (MM/DD/YY) \_\_\_\_\_ Age \_\_\_\_\_

Mother/Guardian Name \_\_\_\_\_ Father/Guardian Name \_\_\_\_\_

Address \_\_\_\_\_ Unit # \_\_\_\_\_ City \_\_\_\_\_ Postal Code \_\_\_\_\_

Mother Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

Father Home Phone \_\_\_\_\_ Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_ E-Mail \_\_\_\_\_

If parent/guardian is unable to be reached, please contact:

Emergency Contact \_\_\_\_\_ Phone \_\_\_\_\_

Class: _____	Day: _____	Time: _____	Length: _____	Cost: _____
Class: _____	Day: _____	Time: _____	Length: _____	Cost: _____
Class: _____	Day: _____	Time: _____	Length: _____	Cost: _____
Class: _____	Day: _____	Time: _____	Length: _____	Cost: _____
Class: _____	Day: _____	Time: _____	Length: _____	Cost: _____
Class: _____	Day: _____	Time: _____	Length: _____	Cost: _____
Class: _____	Day: _____	Time: _____	Length: _____	Cost: _____
Class: _____	Day: _____	Time: _____	Length: _____	Cost: _____
Class: _____	Day: _____	Time: _____	Length: _____	Cost: _____
Class: _____	Day: _____	Time: _____	Length: _____	Cost: _____

New Student [ ] Return Student [ ] Years of Training: \_\_\_\_\_

Please indicate any physical or learning conditions that the instructor should be aware of (example: Asthma, etc.) \_\_\_\_\_

I understand that if my child/children was enrolled in classes from Sept. – June. I agree to uphold any and all policies established by the studio and Toronto Dance Vibe. I agree to release any and all rights and claims against Toronto Dance Vibe and all it's staff and instructors of any claims for injuries that may occur to the student, parent or any other person. I understand that the studio is not responsible for any personal belongings not owned by the studio. I understand that all tuition and fees paid are non-refundable once deposited. All POST-DATED cheques are REQUIRED at registration. NO EXCEPTIONS. I give permission for Toronto Dance Vibe to use any photos, videos and names of the above student(s) for educational and promotional reasons. **I have read and agree to the above terms.**

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

\_\_\_\_\_  
Date

Parents are asked to keep themselves aware of studio events by reading the signs posted on the door and on the bulletin board. Information is also available on our website at [www.dancevibes.com](http://www.dancevibes.com). Please remain informed of studio events to avoid disappointment.

### For Office Use Only

PAYMENT INFORMATION	Amount Paid	Cash	Cheque #	Date
<b>1st Term – registration date</b>				
<b>Costume – Oct 1 2007</b>				
<b>2nd Term – Nov 1 2007</b>				
<b>3rd Term – Feb 1 2008</b>				
<b>4th Term – April 1 2008</b>				

\_\_\_\_\_  
**Toronto Dance Vibe  
Staff Member Signature**

\_\_\_\_\_  
**Date**