

Studio Address: 833 Upper James Street, Rear Unit 905-529-9885 www.notjustanotherdancestudio.ca

Date Rec'd:		
Receipt #:		
Paid Via:	□ Cash	\$
☐ Credit Card:		
☐ Cheque #:		
Dated:		

Spring 2016 Registration Form

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Registrant's Name	:			
Parent's Names:				
Address:				
City:		Postal Code:		
Home Phone #:		e-mail address:		
Cell Number (mom):		Cell Number (dad):		
Date of Birth: (n	n) (d)	(y)	☑ Female	☐ Male
Any allergies / me	dical information:			
How did you hear a (New Students Only	bout us?	☐ Spec Auction ☐ Referred by: ☐ Other:	☐ Culture & Re	c Guide Ad
	taking lessons in the Spring TERM PRICING: Child Dance Classes	ng session are not e	nin 60 min	75 min
	Adult Dance & Yoga Class		.50 \$175.00	\$203.00
Class		Day / Tiı	me	
]				

^{*} **ADV Classes** - Students must have 2+ years dance experience *or* Director approval to enroll.

Not Just Another Dance Studio Policy Letter

General/Absence Policies:

- Not Just Another Dance Studio (NJADS Inc.) is not responsible for personal injury or lost property.
 Please label all belongings.
- Please notify your instructor if someone, other than a parent/legal guardian, will pick up your child.
- No chewing gum or food is permitted in class. Water is allowed and encouraged.
- Please notify the director if your child will miss a class. Text or call (905) 529-9885 or email amanda@notjustanotherdancestudio.ca. Please note: missed classes are non-refundable.
- If NJADS cancels classes due to an emergency, i.e., inclement weather, loss of power etc. classes
 are not refunded. NJADS Inc. will post an update on the NJADS Inc. student website/Facebook
 group, and advise 102.9 K-Lite FM. If classes are cancelled because of instructor illness, NJADS Inc.
 will re-schedule the affected classes.
- Studio is closed on Statutory Holidays (Thanksgiving Monday, Family Day, Good Friday, Easter Monday, and Victoria Day). Classes as usual on Halloween.

Payment Policy:

- Enrolment is not guaranteed until payment in full is received, we cannot hold spots.
- N.S.F. cheques must be paid within 7 days, cash or certified cheque, plus a \$20.00 service charge (Including HST = \$22.60).

Refund Policy:

- NJADS Inc. reserves the right to change the schedule, if necessary. NJADS Inc. will issue a full refund if it cancels a class.
- Students who withdraw from a class must do so in writing via email.
- NJADS Inc. will issue a full refund if a student withdraws before the start of a session, subject to a \$20 administration fee (including HST, for a total of \$22.60).
- Once classes begin, students who withdraw from a class forfeit their \$70 recital fee. NJADS Inc. must be notified of a withdrawal before the end of the month. Any funds deposited on the 1st of each month are non-refundable. Once NJADS Inc. receives the withdraw notification, NJADS Inc. will destroy any remaining post-dated cheques or will stop all credit card payments. If notice is given after April 1st, NJADS Inc. still requires payment until the end of the season.

Occasionally NJADS will post photographs and/or video of students on social media.	I consent that they may do so for
advertising and promotional purposes without compensation to my child or myself.	If I do not wish for images of my
child to be used, I will indicate my wishes here.	

☐ I do not authorize NJADS Inc. to use photographs and/or video of my child.

I agree and will adhere to the NJADS Inc. policies as detailed above. I realize that any program that involves movement or dance can result in physical injury. As the legal parent or guardian, I hereby release and hold harmless Not Just Another Dance Studio (NJADS Inc.), its owners and instructors from any and all liability, claims, demands and causes of action whatsoever, arising out of or related to any loss, damage, or injury that may be sustained by the participant and/or the undersigned, while in or upon the premises of NJADS Inc. Permission is hereby granted to the studio and its representatives to transport my child to a local doctor or hospital for medical treatment if necessary in the event that they are not able to reach a parent or guardian. I hereby declare the participant to be in good physical and mental health. By signing I agree that I have read this release, understand its content, and I freely accept the terms. By supplying my email address, I consent to receiving electronic correspondence from NJADS Inc.

Parent/Guardian's Signature:	Date: