

**INTERPLAY**  
**2009-2010 REGISTRATION FORM**

Name of Student: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Month/Day/Year Age

Mother's Name: \_\_\_\_\_ Father's Name: \_\_\_\_\_

Address: \_\_\_\_\_  
Street Unit City Postal Code

Phone (H): \_\_\_\_\_ Are you a part of the Interplay Dance Co. Yes \_\_\_ No \_\_\_

Phone (B) – Mother: \_\_\_\_\_ Phone (B) – Father: \_\_\_\_\_

Cell phone: \_\_\_\_\_ email: \_\_\_\_\_

Name of Doctor: \_\_\_\_\_ Phone: \_\_\_\_\_

Health Card Number: \_\_\_\_\_ Allergies/Medical Condition: \_\_\_\_\_

Emergency Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Relation to Student: \_\_\_\_\_

Where did you hear about the school?

Newspaper (which?) \_\_\_\_\_ Camp Guides \_\_\_\_\_ Internet \_\_\_\_\_  
Dance Magazine \_\_\_\_\_ School Location Sign \_\_\_\_\_ Return Student \_\_\_\_\_  
Referral (by who?) \_\_\_\_\_ Other (please specify) \_\_\_\_\_

**CLASSES SELECTED:**

- \*All post dated cheques or automatic withdrawal from charge card authorization must accompany application
- \*A charge card is required at time of enrollment. Outstanding fees will be charged to charge card at net 30 days.
- \* Please do not forget to enclose a separate cheque for the \$30.00 registration fee & \$25.00 production fee.
- \* Costume rental of \$80.00/costume fee of \$130.00 is due on enrollment date, includes a DVD – one per family
- \* Please read all rules, regulations and release form prior to signing and dating form
- \* **5% gst is applicable on all service fees and 13% on all costume fees.**

<b>Name of Class/Day/Time:</b>	<b>Name of Class/Day/Time:</b>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

\*Use back of this form if you run out of room

**Office Use Only:**

Total Hrs/Week: \_\_\_\_\_ Fee Per Term(before GST): \_\_\_\_\_ Fee Per Month(before GST): \_\_\_\_\_  
Reg Fee Paid (\$30.00 before GST) \_\_\_\_\_ Production Fee :(\$25.00 before GST) \_\_\_\_\_  
Date of Enrollment \_\_\_\_\_ Early Reg Discount \_\_\_\_\_ Start Date: \_\_\_\_\_  
Discounts given: 5% sibling \_\_\_\_\_ IDC Costume Fee \_\_\_\_\_ \$300.00 + 13%  
Rental Fee \_\_\_\_\_ (+ 13% tax) Costume Fee \_\_\_\_\_ (+ 13% tax)

**Payment Method: Full Payment (incl GST)** \_\_\_\_\_  
**Post-dated Term (inc GST):** 1<sup>st</sup> \_\_\_\_\_ 2<sup>nd</sup> \_\_\_\_\_ 3<sup>rd</sup> \_\_\_\_\_ 4<sup>th</sup> \_\_\_\_\_  
**Post-dated Monthly cheques (inc GST):**  
1<sup>st</sup> \_\_\_\_\_ 2<sup>nd</sup> \_\_\_\_\_ 3<sup>rd</sup> \_\_\_\_\_ 4<sup>th</sup> \_\_\_\_\_ 5<sup>th</sup> \_\_\_\_\_ 6<sup>th</sup> \_\_\_\_\_ 7<sup>th</sup> \_\_\_\_\_ 8<sup>th</sup> \_\_\_\_\_ 9<sup>th</sup> \_\_\_\_\_ 10<sup>th</sup> \_\_\_\_\_

**Charge Card Monthly Withdrawal** \_\_\_\_\_ Charge Card: M/C, VISA (circle one)  
Term payment \_\_\_\_\_ Monthly payment \_\_\_\_\_ Full Payment \_\_\_\_\_ (please initial one)

Charge Card # \_\_\_\_\_ Expiry date \_\_\_\_\_ Verification code \_\_\_\_\_  
Card Holder Name \_\_\_\_\_ Signature Authorization: \_\_\_\_\_

**RELEASE AND INDEMNIFICATION**

Name of Student: \_\_\_\_\_

Name of Parent/Gurardian (If Student under 18 years of age): \_\_\_\_\_

Course Location: **Interplay, 250 Davisville Ave, Unit 502, Toronto, ON**

Date Course Commences: \_\_\_\_\_

**RELEASE AND WAIVER**

In consideration of Interplay School of Dance Ltd., accepting this application, I, for myself, my heirs, executors, administrators and assigns, release Interplay School of Dance Ltd., its respective servants, agents and employees from any claims, demands, damages, actions or causes of actions whatsoever arising out of or in consequence of the above-noted Student participating in a dancing lesson/course or any other activity related to Interplay School of Dance Ltd., including but not limited to claims, demands, actions or causes of actions related to loss of or damage may have arisen by reason of negligence of Interplay School of Dance Ltd., its servants, agents or employees. Without limiting the generality of the foregoing, I further release any recourses which I may now or hereafter have resulting from any decisions or activities of the Interplay School of Dance Ltd.. For the aforesaid consideration I agree to indemnify Interplay School of Dance Ltd.. it servants, agents or employees from any claims or demands which might be made against the Interplay School of Dance Ltd., arising out of or in consequence of the attendance or participation by the Student in a dance lesson/course or any other activity of Interplay School of Dance Ltd.. If this Release and Waiver is signed by any person other than the Student, the Student is under the age of eighteen (18) years, and I have full legal right and authority to sign this waiver on behalf of the Student.

\_\_\_\_\_  
(Signature of Parent or guardian, if student less than eighteen years of age)

\_\_\_\_\_  
(Signature of Student, if eighteen years of age or older)

**Regulations at Interplay**

I have received a copy of the Regulation guidelines of Interplay and have read it thoroughly prior to signing this form. I will also go through these guidelines with my child so that he/she is aware prior to class participation.

I give permission for Interplay to use photographs of my child for promotional purposes only.

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

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

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

\_\_\_\_\_  
**Students signature (18 and over)**

\_\_\_\_\_  
**Interplay Staff Signature**