



# BOSWELL DANCE ACADEMY

## APPLICATION FOR ENROLLMENT 2021-2022

I, (the undersigned) have read and hereby AGREE to the terms and regulations as stated in the Academy's brochure for the duration of this enrollment school year.

**STUDENT Name** \_\_\_\_\_

Address \_\_\_\_\_

Postal Code \_\_\_\_\_ Date of Birth: D \_\_\_ M \_\_\_ Y \_\_\_\_\_

Tel. \_\_\_\_\_ Cell: \_\_\_\_\_

Email \_\_\_\_\_

Parent 1/Guardian Name \_\_\_\_\_

Parent 2/Guardian Name \_\_\_\_\_

Parent 2 Cell/Email: \_\_\_\_\_

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

(\* Please also sign the Waiver below)

### For Office Use Only

Reg. Fee \$ \_\_\_\_\_ Chq# \_\_\_\_\_

**QP:** \$ \_\_\_\_\_ + \$ \_\_\_\_\_ GST = \$ \_\_\_\_\_

Q1 \_\_\_\_\_ Chq# \_\_\_\_\_

Q2 \_\_\_\_\_ Chq# \_\_\_\_\_

Q3 \_\_\_\_\_ Chq# \_\_\_\_\_

Q4 \_\_\_\_\_ Chq# \_\_\_\_\_

**MP:** \$ \_\_\_\_\_ + \$ \_\_\_\_\_ GST = \$ \_\_\_\_\_

Sep \_\_\_\_\_ # \_\_\_\_\_ Feb \_\_\_\_\_ # \_\_\_\_\_

Oct \_\_\_\_\_ # \_\_\_\_\_ Mar \_\_\_\_\_ # \_\_\_\_\_

Nov \_\_\_\_\_ # \_\_\_\_\_ Apr \_\_\_\_\_ # \_\_\_\_\_

Dec \_\_\_\_\_ # \_\_\_\_\_ May \_\_\_\_\_ # \_\_\_\_\_

Jan \_\_\_\_\_ # \_\_\_\_\_ Jun \_\_\_\_\_ # \_\_\_\_\_

### For Office Use Only

CLASSES:

Total Hours: \_\_\_\_\_

### For Office Use Only

#### CLASS COSTUMES:

\$ \_\_\_\_\_ Chq# \_\_\_\_\_ \$ \_\_\_\_\_ Chq# \_\_\_\_\_

#### OTHER COSTUMES:

\$ \_\_\_\_\_ Chq# \_\_\_\_\_ \$ \_\_\_\_\_ Chq# \_\_\_\_\_

#### RAD EXAMINATION

Grade Level: \_\_\_\_\_ \$ \_\_\_\_\_ Chq# \_\_\_\_\_

**COMPETITIVE** Contract Signed \_\_\_\_\_

# Groups \_\_\_\_\_ BL / JZ / LYR / HH / TP / MO / AC

Comp GROUP Entry Fees (Total: \$ \_\_\_\_\_)

\$ \_\_\_\_\_ Chq # \_\_\_\_\_ \$ \_\_\_\_\_ Chq # \_\_\_\_\_

No. of Solos \_\_\_\_\_ / Duo \_\_\_\_\_ / Trio \_\_\_\_\_

S/D/T Coaching Fees: \$ \_\_\_\_\_ Chq # \_\_\_\_\_

#### \*ACTIVITY WAIVER & PUBLICITY RELEASE

I, the signing parent recognize that dance classes require physical exertion which may be strenuous and may cause physical injury.

I am aware of this risk when registering my child and release Boswell

Dance Academy and its faculty from any liability of injury that may occur as a result of participating in classes.

I understand and allow that dance photos/video footage of the student/s enrolled above may possibly be used in studio related media/publication.

Parent Signature: \_\_\_\_\_