



# BOSWELL DANCE ACADEMY

## ADULT APPLICATION FOR ENROLLMENT 2022-2023

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 session/enrollment season.

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

Address \_\_\_\_\_

City: \_\_\_\_\_ Postal Code \_\_\_\_\_

Tel: \_\_\_\_\_

Email: \_\_\_\_\_

Signature : \_\_\_\_\_  
(\* Please also sign the Waiver below)

Emergency Contact: \_\_\_\_\_  
Tel: \_\_\_\_\_

### For Office Use Only

Annual \$15 Adult Reg. Fee \_\_\_\_\_

#### QUARTER FEES

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

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

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

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

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

#### SEASONAL CLASS SESSION FEES

SF: \$ \_\_\_\_\_ + \$ \_\_\_\_\_ GST = \$ \_\_\_\_\_

Fall \_\_\_\_\_ # \_\_\_\_\_

Winter \_\_\_\_\_ # \_\_\_\_\_

Spring \_\_\_\_\_ # \_\_\_\_\_

### For Office Use Only

PROGRAM/CLASSES: \_\_\_\_\_ Total Hours: \_\_\_\_\_

### For Office Use Only

**CLASS COSTUMES:** only if applicable

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

**OTHER COSTUMES:**

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

#### \*ACTIVITY WAIVER & PUBLICITY RELEASE

I, the student, recognize that dance classes require physical exertion, which may be strenuous and may cause physical injury. I am aware of this risk when registering myself and do hereby release Boswell Dance Academy and its faculty from any liability of injury that may occur as a result of participating in classes.

I understand that dance photos/ may possibly be used in studio related social media or school newsletters.

Adult Student Signature: \_\_\_\_\_