



# unlock unleash control

by centre stage dance studio

## Camp/Summer Registration Form

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

**SUMMER DANCE CAMP – POPSTARS!** } \$275 tx incl

July 22 – 26 (5 - 11 yrs)

**BROADWAY BABIES** } \$75 tx incl

July 22 – 26 @ 10am – 10:45am (2 ½ - 4 yrs)

**SUMMER DANCE CAMP – DISNEY!** } \$275 tx incl

August 12 - 16 (5 - 11 yrs)

**SUMMER DANCE CAMP – SUPERHEROES & PRINCESSES!** } \$275 tx incl

August 19 - 23 (5 - 11 yrs) *this camp is at CSDS in New Hamburg*

**CSDS/UUC SUMMER INTENSIVE**

August 6 - 10

**Pre-JR/JR** } \$325

Ages 5-8yrs / 9:30am – 3:30pm

**INTER** } \$350

Ages 9-12yrs / 9:00am – 3:30pm

**SENIOR** } \$375

Ages 13yrs + / 3:30pm – 9:30pm

### PLEASE READ AND SIGN

#### THE FOLLOWING IDNEMNITY CLAUSE:

I hereby assume all of the risks arising out of, incidental to, or in any way connected with my or my child's participation in dancing lessons provided by Centre Stage Dance Studio and its teachers or agents, including, but not limited to, any risks which are not foreseeable.

I hereby release C.S.D.S. and all its officers, directors, employees, including teachers and supervisors from any and all liability and any and all claims arising out of, incidental to, or in any way connected with my or my child's participation in any lessons, competitions and or performances.

I (we) consent to the participation of the student named below in these lessons. I (we) make the acknowledgements, assume the risks and responsibilities and release the above named school and teachers in accordance with this release, acknowledgement and assumption of risk for and on behalf of myself and the student named below.

I hereby acknowledge the terms and conditions and the rules and regulations stated in this form and will adhere to them.

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

Date: \_\_\_\_\_

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

Address: \_\_\_\_\_

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

Telephone # Home: \_\_\_\_\_

Cell: \_\_\_\_\_

Work: \_\_\_\_\_

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

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

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

Age: \_\_\_\_\_ Birthdate: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
d m y

Physical Limitations: \_\_\_\_\_ Allergies: \_\_\_\_\_

I agree in providing my email address that I may receive messages that contain commercial content due to class, camp and event pricing.

### Please make all cheques payable to:

#### C.S.D.S. (Centre Stage Dance Studio)

Note: A fee of \$25 will be charged on all cheques returned N.S.F. due to closed accounts, etc., to cover bank charges and administrative fees incurred by Centre Stage Dance Studio.

FEE: \_\_\_\_\_

CASH CHQ# \_\_\_\_\_ DEBIT VISA MC

E\_TRANSFER (sent to unlockunleashcontrol@gmail.com)

DATE RECEIVED: \_\_\_\_\_