



Dance Registration Form

Name: _____

D.O.B: ____/____/____ M F Parent/Guardian: _____

Home Address: _____ City: _____ Postal Code: _____

Phone #: _____ Work #: _____ Mobile #: _____

E-mail Address: _____

Health Number: _____ Emergency Contact #: _____

Medical Conditions (allergies, asthma, injuries): _____

| | | |
|--------------------------------------|---|---|
| <input type="checkbox"/> | Cash | Registered Class (es) 1 _____ \$ _____ x |
| <input type="checkbox"/> | Payment by Certified Cheque | Specialty Class 2 _____ \$ _____ x |
| <input type="checkbox"/> | Payment by Credit Card | 3T Program /Showbiz kids 3 _____ \$ _____ x |
| Visa <input type="checkbox"/> | Master Card <input type="checkbox"/> | Total Fees Submitted \$ <input style="width: 100px; height: 20px;" type="text"/> |

Circle the class (es) you are registering for **Ballet** **Jazz** **Contemporary** **Tap** **Music Theatre** **Modern** **Hip Hop**
Latin **Ballroom** **Belly dance** **Ariel Silks** **Conditioning** **Pilates** **Acting Level** **Film/TV** **Ensemble** **Voice lessons**

Credit Card # _____ **Expiry Date** _____

Name of card holder (print) _____ **Card Holder Signature** _____

Please make **Certified Cheque or Money Order** payable to: **Tranter Institute 610 Huronia Rd Unit 11 Barrie, ON L4N 0W5 Tel: 705-730-7678 (personal cheques are not accepted)**

Cancellation Agreement

If the applicant is enrolled in a Tranter Institute program and decides they will no longer participate, the applicant or applicant(s) Parent and/or Guardian and must complete a cancellation form and understand that a refund or transfer is not available. If the applicant leaves, the applicant and/or applicant(s) Parent and/or Guardian are responsible for the remainder of fees for the rest of the semester they are enrolled.

Signature of Applicant or Parent/Guardian Date

Injury Waiver

Each applicant and/or their Parent and/or Guardian hereby release The Tranter Institute and its directors, instructors and employees from claim for personal injury sustained in, on or about the facilities and at any other location or function that the applicant might be involved with the centre. Applicants understand that Tranter Institute is not responsible for lost or stolen articles.

Signature of Applicant or Parent/Guardian Date

Photography and Video Waver

Each student and his or her legal guardians) hereby release Tranter Institute, the rights to all photography and or video that may be taken by or for The Tranter Institute during classes, workshops or performances, for use in advertising and promotion.

Signature of Parent/Guardian Date

Hip Hop Waver

Students enrolling in a teen hip hop class and over the age of 12 are aware of the explicit lyrics and sexual connotations that this style of music contains. The instructor will do their best to eliminate this, however it is very difficult and in most cases impossible. Parents in signing understand and agree to allow for this music to be played in the classroom.

Signature of Parent/Guardian Date of /Guardian Date