



> **STUDENT INFORMATION**

First Name: _____ Last Name: _____ Age: _____
 Address: _____ Date of Birth (mm/dd/yy): _____
 Parent's Name: _____ Parent's CellPhone: _____
 Home Phone: _____ Parent's Email address: _____
 Allergies/Medical Conditions. Please provide details: _____
 Emergency Contact: _____ Emergency Contact Phone#: _____

> **AUTHORIZATION, RELEASE AND ACKNOWLEDGEMENT**

LIABILITY WAIVER: By signing this form, students and the undersigned agree to release, indemnify and hold harmless Douglas Ballet Academy, and their directors, teachers and contractors from and against all claims of injury, damage or loss of any kind whatsoever arising out of the participation in any activities related to Douglas Ballet Academy.

MEDICAL EMERGENCY: In an event of emergency, I authorize Douglas Ballet Academy and its staff members to use reasonable discretion in rendering first aid and/or arranging for emergency medical care, including hospitalization at the expense of the undersigned.

PHOTO/VIDEO OR DVD RECORDING WAIVER: By signing this form, I give consent to allow photos, video/DVD recording be taken during the course of Douglas Ballet Academy classes and productions. We may in any event use them for future promotional and advertising purposes.

COMMUNICATION: All communication for Disney's Peter Pan Jr. production is done via e-mail. Parents MUST provide their email and commit to checking your email on a regular basis.

REFUNDS: \$150.00 due upon registration is **NON-REFUNDABLE and NON-TRANSFERABLE.**
 Withdrawals will not be accepted after September 15, 2014 and no refunds will be given.

ATTENDANCE & COMMITMENT: Students are expected to make a full commitment to all classes as scheduled, this includes few or no absentees. They are expected be on time for class and participate in all warm-up and drills and not to disrupt other students.

VOLUNTEER HOURS: Parent's participation is required to ensure a successful theatre production. We ask that parents donate at least 4 hours of volunteer time. We thank you in advance for satisfying this volunteer requirement and appreciate all your time and effort.

I have read, understood and acknowledged to all Douglas Ballet Academy's policies.

All cheques, including post-dated ones MUST be completed and submitted upon registration. Any NSF/Returned cheque will be subject to a \$30.00 surcharge.

Date: _____ Parent's Signature: _____

> **FOR OFFICE USE ONLY:**

Prod Deposit	\$150.00	Upon registration
Prod Balance	\$200.00	Sept 15, 2014
Costume Fee	\$150.00	Sept 15, 2014
Volunteer Deposit	\$100.00	March 1, 2015

NOTES/COMMENTS:
 Musical Theatre Class Registered Level: