



Studio Address

#6 Fisher Crescent
Okotoks, Alberta

Mailing Address

Heart To Sole Danceworks
Box 125 Okotoks, AB, T1S 1A4

Phone:403-995-9630

Email: hearttosole@telus.net

Preschool Registration Form

Students Surname: _____

Students First Name: _____

Date of Birth: _____(dd/mm/yyyy)

Age as of September 1st: _____

Mailing Address: _____

Postal Code: _____

Email Address: _____

Home Phone # _____

Mother's Name: _____

Cell Phone # _____

Father's Name: _____

Cell Phone # _____

Emergency Contact: _____

Phone # _____

Previous Dance experience:

Does your child have any medical concerns or allergies we should be aware of? _____ Yes / No

If yes, please explain: _____

Where did you hear about Heart to Sole Danceworks? _____

Classes Registering In:

Class Type	Day & Time	Session	Cost
1.	@	Fall / Winter / Spring	\$
2.	@	Fall / Winter / Spring	\$
3.	@	Fall / Winter / Spring	\$
4.	@	Fall / Winter / Spring	\$
5.	@	Fall / Winter / Spring	\$
6.	@	Fall / Winter / Spring	\$

***** All Prices Include GST *****

Heart to Sole Danceworks Policies, Waiver and Expectations:

Payment:

1. Monthly fees can be made by post-dated cheque (made payable to Heart to Sole Danceworks) or pre-authorized credit card (visa or mastercard).
2. All other expenses can be paid by cash, cheque, debit, visa or mastercard.
3. Registration fees are due at the time of registration and are non-refundable. This is a yearly fee that runs from September 1st to June 30th.
4. All NSF cheques and returned payments will be subject to a \$25.00 administration fee.
5. A 10% Family Discount will be offered for families with more than 1 (one) child registered. The lesser of the fees will be discounted.

Cancellation and Refund Policy:

1. REFUNDS will only be granted with 20 days' notice of the class start date. Exception: medical with a doctor's note.
2. All refunds will be charged a \$25.00 administration fee.
3. Due to predetermined class sizes and for the benefit of all dancers, there will be no make-up classes for missed classes.
4. Heart To Sole Danceworks reserves the right to cancel or change class times or days if registration numbers are insufficient or instructors become unavailable. Full refunds will be given if an alternate class cannot be found.

Parent and Dancer Expectations:

1. All parents and dancers will behave in a professional, respectful and morally acceptable manner while at the studio or in attendance of any studio function.
2. Dancers are expected to arrive ready and focused for all classes. Proper dancewear and hair should be worn to all classes.
3. Please keep sick and contagious dancers at home (chronic coughing/runny nose, fever, stomach viruses or symptoms). Students not fit for class will be sent home.
4. Due to scheduling, dance instructors are unable to have parent meetings during class time. Please address any concerns with the director or office administrator or have the front desk arrange a mutually acceptable meeting time.

By signing this form, I agree to all terms and conditions outlined by Heart to Sole Danceworks & Cheerleading.

Parent(s) Signature _____

Date _____

Liability and Insurance Waiver:

Heart to Sole Danceworks will not be held responsible for lost or stolen property. Please leave all valuables at home. Dance by their nature involve certain elements of risk which involve a potential for bodily injury (which may include, but are not limited to pulled muscles, knee and ankle injuries, concussion). I acknowledge this risk and agree to permit my child to participate. The applicant agrees that Heart to Sole Danceworks and or proprietors will not be held responsible for any loss or accidents and agrees to release same from all claims or damages which may result of, or by any reason of, such loss or accidents. The company reserves the right to request any applicant to withdraw from the dance season prior to its termination if, in the opinion of the company or the instructors, the applicant is not acting in a reasonable manner. The company reserves the right to cancel, with proportional refund, any class or session due to circumstances that are not to the benefit of the applicants or the studio.

Parent(s) Signature _____

Date _____

Heart to Sole Danceworks Payment Form

For Office Use

Registration Fee \$ _____ (\$25/Dancer or \$40/family)
Fall Session Fees + \$ _____
TOTAL \$ _____

Payment Method: _____ Date: _____ Authorization # _____

I will be paying: In Full _____ cash / cheque / debit / visa / mastercard

I will be paying with: Post-dated Cheques _____ Preauthorized Credit Card _____

Registration Fee \$ _____ (\$25/Dancer or \$40/family)
Winter Session Fees + \$ _____
TOTAL \$ _____

Payment Method: _____ Date: _____ Authorization # _____

I will be paying: In Full _____ cash / cheque / debit / visa / mastercard

I will be paying with: Post-dated Cheques _____ Preauthorized Credit Card _____

Registration Fee \$ _____ (\$25/Dancer or \$40/family)
Spring Session Fees + \$ _____
TOTAL \$ _____

Payment Method: _____ Date: _____ Authorization # _____

I will be paying: In Full _____ cash / cheque / debit / visa / mastercard

I will be paying with: Post-dated Cheques _____ Preauthorized Credit Card _____

If paying by preauthorized credit card please fill out the following:

I _____ (cardholder name) authorize Heart to Sole Danceworks to charge my VISA / Mastercard (please circle one) for my sessional dance fees in the amount of \$ _____ .

Credit Card # _____ Expiration Date _____

Customer Signature: _____