



## Medicine Hat School of Performing Arts, Medicine Hat, AB Registration Form

### Deadlines:

- Early Bird Deadline: Friday, June 15, 2018
- Registration Deadline: Friday, June 29, 2018

Name of Participant: \_\_\_\_\_

Name of Parent: \_\_\_\_\_

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

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

Telephone: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Dance School: \_\_\_\_\_

### FEES

- Level 1: \$189 (Early Bird) + GST (8 - 12 yrs.)
- Level 2: \$229 (Early Bird) + GST (13+ yrs.)
- Level 1: \$240 + GST (8 - 12 yrs.)
- Level 2: \$280 + GST (13+ yrs.)

Please Bring: Long-sleeved top, Pants, Socks, Runners, Shorts & T-shirt (some participants prefer to wear these under their long clothing), Yoga Mat, and Notebook & Pen

### TERMS AND CONDITIONS

I HAVE READ AND ACCEPT THE BELOW REGISTRATION TERMS & REFUND POLICY:

- SQx recommends that participants purchase a personal insurance policy in case of injury or other unforeseen circumstances that might interfere with the participant completing the program. Note: It is recommended that all participants be injury free. Attending class, with a preexisting injury, is done so at the participant's own risk.
- SQx reserves the right to retain all or part of a participant's program fees in the event a participant withdraws.
- SQx will not be held responsible for damage, loss of property, or personal injury, however caused.
- A participant's place is reserved upon receipt of a **\$75 deposit**. Reservations are accepted in order of deposit receipt. Payments are processed on as received.
- SQx must receive the remaining program fee no later than **15 working days** prior to program commencement. Otherwise, it will be assumed that the participant does not wish to attend the workshop. Moreover, the participant's place may be offered to another participant who has been wait-listed. In this case, deposits will not be returned.
- SQx programs are designed to cater to participants of all ages and levels. Participants are required to maintain a mature attitude throughout the program to ensure an enjoyable and productive experience for all participants. If a participant does not abide by this regulation, they may be asked to leave without refund.



- SQx reserves the right to alter faculty or content of the program without prior notification.
- Parents must pick-up participants immediately after their last class of the program.
- SQx reserves the right to collect photographs or video footage of participants to be used in company promotional marketing and branding material (including but not limited to DVD, website, poster, and flyer content).

## REFUND POLICY

Registrations shall be entitled to refund under the following circumstances:

- Written notice of withdrawal from the program received by SQx prior to Early Bird deadline will receive a full refund.
- Written notice of withdrawal from the program received by SQx up to 28 days prior to program commencement will incur a 25% cancellation fee.
- Written notice of withdrawal from the program received by SQx between 27 - 22 days prior to program commencement will incur a 50% cancellation fee.
- Written notice of withdrawal from the program received by SQx 21 days (or less) prior to program commencement is not eligible for refund.
- Total incapacitation due to medical reasons--supported by medical documentation--will incur a 15% cancellation fee.
- Partial refunds shall not be issued for non-attendance.
- Fees are non-transferable.
- In the unlikely event that a program is cancelled, participants will receive a full refund.

## DECLARATION

I, \_\_\_\_\_ (Print Parent or Legal Guardian Name—for participants 18 yrs. & under), understand and accept the terms and conditions of enrolment (including refund policy) and warrant that my son or daughter is physically fit and able to participate in the program. I acknowledge that the he or she is responsible for their own property and attends classes at their own risk.

I agree to release and indemnify SQx--in addition to our workshop hosts--from and against any claim, demand, or liability for injury, loss, or damage whatsoever and howsoever caused.

In case of emergency, I authorize SQx to seek medical assistance for my child.

Signature of Parent or Legal Guardian:

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