

EVOLUTION DANCE & FITNESS STUDIO INC.

Registration Form - Page 1

Family Identification # _____

Mother's Full Name - _____

Father's Full Name - _____ - _____

Address - _____ City - _____

Postal Code - _____ E-Mail Address - _____

Home Phone - _____ Cellular - _____

Children: Full Name - _____ Age - _____

Birth Date - _____ Health Card # - _____

Full Name - _____ Age - _____

Birth Date - _____ Health Card # - _____

Full Name - _____ Age - _____

Birth Date - _____ Health Card # - _____

Medical Information: Please describe any allergies, injuries, and/or medical conditions

Emergency Contact Name - _____ Phone - _____

I have read and agree to the information in the Evolution Registration Package including the Enrolment Protocol, Studio Policies, Dress Code, Parent/Guardian Code of Conduct and the Dancer Code of Conduct. I acknowledge that there is a risk of injury involved in dance and fitness classes. I accept the risk and release Evolution Dance & Fitness Studio Inc. from all liability. I acknowledge that any fees will not be returned upon withdrawal. I allow Evolution Dance & Fitness Studio Inc. to use photos/images/name of myself and/or my children for promotional use at any time.

Date

Parent/Guardian Signature

***BONUS – All registered children receive \$25.00 off the booking of their Birthday Party**

EVOLUTION DANCE & FITNESS STUDIO INC.

Registration Form - Recreational

Family Identification # _____

Child #1 – Full Name _____ Age Group _____

Type of Dance _____ Day/Time _____

Child #2 – Full Name _____ Age Group _____

Type of Dance _____ Day/Time _____

Child #3 – Full Name _____ Age Group _____

Type of Dance _____ Day/Time _____

Fees per Student – Recreational Program

- 1 x 45-minute Class \$12.00 x 12 weeks = \$144.00 x 3 terms = \$ 432.00 / year + HST
- 1 x 1 Hour Class \$15.00 x 12 weeks = \$180.00 x 3 terms = \$ 540.00 / year + HST
- 2 x (1 hr) Classes \$14.50 (per class) x 12 weeks = \$348.00 x 3 terms = \$1,044.00 / year + HST
- 3 x (1 hr) Classes \$14.00 (per class) x 12 weeks = \$504.00 x 3 terms = \$1,512.00/ year + HST
- 4 x (1 hr) Classes \$13.00 (per class) x 12 weeks = \$624.00 x 3 terms = \$1,872.00 / year + HST
- 5 x (1 hr) Classes \$12.00 (per class) x 12 weeks = \$720.00 x 3 terms = \$2,160.00 / year + HST
- 6 or More Classes – See Our Family Rates for Better Rate Plans – **Extra Savings!!!!**

Tuition Amount \$ _____
Minus Discount Plan - \$ _____ - _____
Sub-Total \$ _____ Type of Discount (certain conditions apply)
Registration Fee \$ 35.00 (per family)
Costume Fee \$ 85.00 (per costume)
13% HST \$ _____
Total Amount \$ _____ Invoice # _____

TUITION - \$ _____ COSTUMES - \$ _____

Method of Payment

___ Debit ___ Visa ___ MasterCard ___ Series of Post-Dated Cheques

Credit Card Number _____ Expiry _____ Code _____

Name on Card _____ Signature _____

I hereby give permission and authorize Evolution Dance & Fitness Studio Inc. to debit my Credit Card as indicated above for the amount shown.

EVOLUTION DANCE & FITNESS STUDIO INC.

Registration Form – Competitive Program

Family Identification # _____

Full Name _____ Age _____

Birth Date _____ (Please attach copy of birth certificate)

Company - _____ Hours Training per Week _____

Program - _____ Interested in Solo/Duet/Trio? _____

Class Schedule - _____

Fees per Student – Competitive Program

Part Time Program - 5 to 6 hours a week- \$240.00/ month + HST, \$2,160.00/yr + HST

Full Time Program - 7 to 9 hours a week - \$280.00/month + HST, \$2,520.00/yr + HST

Extended Program - 10 to 15 hours a week - \$328.00/month + HST, \$2,950.00/yr + HST

Family Plan Program - 16 to 20 hours a week - \$332.80/month + HST = \$2,995.00/yr + HST

Tuition Amount	\$ _____	
Minus Discount Plan -	\$ _____ - _____	
Sub-Total	\$ _____	Type of Discount (certain conditions apply)
Registration Fee	\$ 35.00	(per family)
Costume Deposit	\$ 85.00	(per costume)
13% HST	\$ _____	
Total Amount	\$ _____	Invoice # _____

TUITION - \$ _____ COSTUMES - \$ _____

Method of Payment

___ Debit ___ Visa ___ MasterCard ___ Series of Post-Dated Cheques

Credit Card Number _____ Expiry _____ Code _____

Name on Card _____ Signature _____

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EVOLUTION DANCE & FITNESS STUDIO INC.

Registration Form – Family Plan for Recreational and Competitive Families

Family Identification # _____

Child #1 – Full Name _____ Age Group _____

Type of Dance _____ Day/Time _____

Type of Dance _____ Day/Time _____

Type of Dance _____ Day/Time _____

Child #2 – Full Name _____ Age Group _____

Type of Dance _____ Day/Time _____

Type of Dance _____ Day/Time _____

Type of Dance _____ Day/Time _____

Child #3 – Full Name _____ Age Group _____

Type of Dance _____ Day/Time _____

Type of Dance _____ Day/Time _____

Part Time Program - 5 to 6 hours a week- \$240.00/ month + HST, \$2,160.00/yr + HST

Full Time Program - 7 to 9 hours a week - \$280.00/month + HST, \$2,520.00/yr + HST

Extended Program - 10 to 15 hours a week - \$328.00/month + HST, \$2,950.00/yr + HST

Family Plan Program - 16 to 20 hours a week - \$332.80/month + HST = \$2,995.00/yr + HST

Tuition Amount \$ _____
Minus Discount Plan - \$ _____ - _____
Sub-Total \$ _____ Type of Discount (certain conditions apply)
Registration Fee \$ 35.00 (per family)
Costume Fee \$ 85.00 (per costume)
13% HST \$ _____
Total Amount \$ _____ Invoice # _____

TUITION - \$ _____ COSTUMES - \$ _____

Method of Payment

____ Debit ____ Visa ____ MasterCard ____ Series of Post-Dated Cheques

Credit Card Number _____ Expiry _____ Code _____

Name on Card _____ Signature _____

I hereby give permission and authorize Evolution Dance & Fitness Studio Inc. to debit my Credit Card as indicated above for the amount shown.