

# DANCE SPORT TRAINING CAMP 2019

## Registration Form

**DNA: 905.597.3362    email: info@dancedna.ca    www.DanceDNA.ca**

First name:	Last name:	DOB:d/m/y
Home Phone:	Cell:	Bus(opt):
E-mail:	Parent's first name:	
Health card#	Allergies	
Are you Dance DNA member?	Yes	No
Any other relevant information you feel should know		

Please sign below: I acknowledge that there is a risk of injury involved in dance and fitness classes. I accept the risk and release Dance DNA Academy from all liability. I acknowledge that camp tuition is non-refundable. I allow Dance DNA Academy to use photos/images of my children for promotional use at any time. I agree to allow my children to participate in all camp activities. I give Dance DNA Staff and Management the authority to act on my behalf in case of an emergency. Date: \_\_\_\_\_ Parent/Guardian Signature: \_\_\_\_\_

PERMISSION (please check and initial in the spaces provided to agree)

I give my child permission to participate in supervised outdoor activities.

Wk#	Camps Dates	Mark the days you will attend	Ext hrs Y/N	Fees
1	August 26-30			
2				
3				
4				
5				
6				
7				
8				
Total				

**CAMP FEES**

**Full Day:** 9am-5pm  
\$350 for 5 days (HST is extra)

**Daily Rate:** \$80 per day (HST extra)

**Extended hours:** 30 min extra \$10 per person per day

**Discount** for siblings 5%

**Snacks Provided**

Full payment is due at the registration. No post dated cheques. Cheque or cash only. No refund once session is started.

**Only one discount per family**  
**Make all cheques payable to Dance DNA**

**To Register:**  
Email or drop off your filled registration form at Dance DNA Academy at 219 Connie Cres, Unit #5, Concord, ON L4K1L4  
We will register your child once full payment has been received.

PLEASE COMPLETE THE CAMPER PICK-UP AUTHORIZATION FORM.



## Camper Pick-Up Authorization Form

Complete the following list of people who are will be picking up your child from Dance DNA.  
Valid ID may be requested.

1. Name: \_\_\_\_\_ Relationship to camper: \_\_\_\_\_  
\_\_\_\_\_ Contact Phone #: \_\_\_\_\_
2. 2. Name: \_\_\_\_\_ Relationship to camper: \_\_\_\_\_  
\_\_\_\_\_ Contact Phone #: \_\_\_\_\_
3. 3. Name: \_\_\_\_\_ Relationship to camper: \_\_\_\_\_  
\_\_\_\_\_ Contact Phone #: \_\_\_\_\_
4. 4. Name: \_\_\_\_\_ Relationship to camper: \_\_\_\_\_  
\_\_\_\_\_ Contact Phone #: \_\_\_\_\_
5. 5. Name: \_\_\_\_\_ Relationship to camper: \_\_\_\_\_  
\_\_\_\_\_ Contact Phone #: \_\_\_\_\_

Check mark and initial here if this applies to you:

I give my child the permission to sign out at the end of the day and leave UNSUPERVISED. \_\_\_\_\_

Please sign below: I authorize the above people to pick up my child from Dance DNA every day. I understand and I acknowledge that it is my responsibility to inform these people that they need to sign out my child with a counselor at 5pm daily. If any information changes, I assume the responsibility to notify Dance DNA of the correct information.

\_\_\_\_\_ (Signature) (Date)