

THE CITADEL DANCE PROGRAM

2018/19 REGISTRATION

| DAY | CLASS | AGES | TIME | TERM 1 | ✓ | TERM 2 | ✓ | AMOUNT |
|----------|-------------------------|------------|---------------|---------------------|---|---------|---|--------|
| SATURDAY | BALLET ABT® | AGES 3-4 | 9:00-9:30am | \$150 | | \$150 | | |
| SATURDAY | BALLET ABT® | AGES 5-7 | 9:30-10:10am | \$200 | | \$200 | | |
| SATURDAY | LEVEL 1 BALLET ABT® | AGES 8-10 | 10:15-11:10am | \$275 | | \$275 | | |
| SATURDAY | LEVEL 11 BALLET ABT® | AGES 11-14 | 11:15-12:30pm | \$375 | | \$375 | | |
| SATURDAY | POINTE CLASS | | 12:30-1:15pm | \$225 | | \$225 | | |
| | | | | SUB-TOTAL | | | | |
| | | | | SCHOLARSHIP | | (MINUS) | | |
| | | | | OTHER ASSISTANCE | | (MINUS) | | |
| | | | | REGISTRATION FEE | | | | \$25 |

| | |
|--------------|--|
| TOTAL | |
|--------------|--|

| | |
|--------------|--|
| FALL PAYMENT | |
|--------------|--|

| | |
|----------------|--|
| WINTER PAYMENT | |
|----------------|--|

C + C USE ONLY

DATE REGISTERED

REGENT PARK RESIDENT

THE CITADEL DANCE PROGRAM

2018/19 STUDENT INFORMATION

Date: _____

Student's First Name: _____ Last Name: _____

Parent/Guardian's First Name: _____ Last Name: _____

Student Date of Birth: _____ / _____ / _____
Example: (1) (January) (2000)

Parent/Guardian E-mail: _____

Parent/Guardian Phone: _____ Student Phone (*optional*) _____

Emergency Contact Name: _____ Phone: _____

Mailing Address: _____
Street Apt City Postal Code

What is the best way to contact you? Email Phone Either/Both

Would you like to receive newsletters about The Citadel Dance Program? YES NO

Would you like to receive newsletters about Citadel + Compagnie (C+C)? YES NO

Does your child have any injuries, medical conditions, or medications we should know about?:

How did you hear about these dance classes?

Friend/Family C+C Website C+C Newsletter Flyer Other: _____

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2018/19 STUDENT DANCE CLASS WAIVER

PLEASE READ CAREFULLY AND SIGN BELOW

I, _____, hereby agree to the following:

Print first and last name of parent/guardian

1. That the instruction offered at The Citadel is limited to that of basic dance and health.
2. I acknowledge that I understand the nature of the activities my child will be participating in and that my child is in the proper physical condition and capable of participating in the related activities.
3. I attest that my child has no psychological, medical, or emotional conditions that would prevent my child from safe participation in a dance class.
4. I understand that during the course of the dance class instruction the teacher may aid my child's progress with appropriate physical contact.
5. I understand that Citadel + Compagnie is not responsible for my child or other children under my supervision who are left unsupervised in the common areas and areas surrounding The Citadel and that Citadel+ Compagnie will only be supervising my child when he or she is participating in scheduled dance activities, programs or instruction.
6. I release and discharge Citadel+ Compagnie, The Citadel, its directors, administrators, and instructors from any and all liability claim, demand, or action, that I have resulting from injury, death, or damages arising from my child's participation in the dance class, or anywhere on The Citadel premises, including loss that may be caused due to negligence of the released party.
7. Citadel + Compagnie, The Citadel, its directors, and instructors will not be held liable for personal goods lost or stolen from The Citadel premises.

I have read this agreement and fully understand its content and meaning.

Parent/Guardian Signature: _____

Date: _____

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2018/19 STUDENT PHOTO/VIDEO WAIVER

I, _____, (parent/guardian) give consent for

_____, to be photographed/videotaped by Citadel+ Compagnie, its employees, agents, associates, or assistants during classes and/or performances with Citadel + Compagnie.

I authorize Citadel + Compagnie to publish such picture or video footage on websites, social media, and print medias as well as for promotional use of Citadel + Compagnie and project partners' activities. Such picture or video footage will not be used for commercial use. This consent is not revocable. This consent shall not allow any further publication or broadcast of such picture or video footage by any other party, or in any other location or format without my advance written authorization.

Signature: _____

Date: _____

Phone: _____

Email: _____

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2018/19 IMPORTANT DATES & RESPONSIBILITIES

STUDENT RESPONSIBILITIES:

Arrive 10 minutes prior to class start time to be ready.

Call C+C at 416-364-8011 xt.5 if you are not arriving to class that day.

Know that no casual conversation is permitted during any classes.

COMMITMENT TO AN INCLUSIVE, NON-DISCRIMINATING ENVIRONMENT:

Citadel + Compagnie and the staff of The Citadel Dance Program do not and shall not discriminate on the basis of race, color, religion (creed), gender, gender expression, age, national origin (ancestry), disability, marital status, sexual orientation, or military status, in any of our activities or operations. We are committed to providing an inclusive and welcoming environment for all students, parents, visitors and staff. We expect our students to hold the same approach.

IMPORTANT DATES:

TERM 1

September 22, 2018-January 26, 2019

TERM 2

February 2, 2019-May 25, 2019

FAMILY & PUBLIC VIEWINGS

Winter concert: December 15, 2018

Spring recital: May 25, 2019

BREAKS & HOLIDAYS

Winter Holidays: Last class December 15, 2018

First class after holidays January 12, 2019

March Break: week of March 11, 2018

*The Citadel Dance Programs continues through long weekends