



Registration Form for 8 Week Programs 2008-2009

Students Name: _____

Parents Name(s): _____

Home Phone: _____ cell/work: _____

Full Mailing Address: _____

Class(es) Selected: _____

Session (circle): 1(Fall) 2(Winter) 3(Spring)

Email Address: _____

Medical Info: _____

Permission to add picture to website (sign): _____

Payment (circle): Full 2 cheques (may be post-dated)

Cheques payable to Cadance Academy. (Visa payments by phone or in person at Dancing Pines Studio; 1019 Roy Ave, New Minas, B4N 3R7)
Gaea Jess 679-3616 for more info.

If taking more than one program in a session, 5 % discount on each additional class.

8 week 1/2hr classes \$60.00 +HST

8 week 3/4hr classes \$65.00 +HST

8 week 1hr classes \$70.00 +HST

8 week 1 1/2hr classes \$78.00 +HST

For Adult Yoga Only: Seniors/students 1 1/2hr classes 8 week \$70.00+HST

Please Note: There will be no refunds after the 2nd class, you may receive credit for another class only.

Make Up Classes: If you miss a class you will be able to make it up with another class that is equal in length, within the same 8 week session

CADANCE ACADEMY

GENERAL RELEASE FROM LIABILITY DUE TO INSTRUCTION

I, _____, of (address) _____,
(city) _____, (province) _____, being of lawful
age, do hereby release, acquit, and forever discharge Gaea Jess (owner of
Cadance Academy) of 1019 Roy Avenue New Minas, Nova Scotia, and other
Cadance instructors from all actions, claims, demands, or damages accruing to me
resulting from any known or unknown injury, loss, or damage sustained by me
while taking classes at the above referenced premises.

I further certify that I have voluntarily participated in these classes and consider
myself in suitable physical capacity to participate.

In witness whereof, I have executed this release at (location) _____
on (date) _____.

(Signature)