

DATE OF REGISTRATION: _____

STUDIO LOCATION: _____

FAME DANCE STUDIOS LTD.

BOX 1474, LLOYDMINSTER, SK, S9V 1K4// 780-871-1494// e-mail: INFO@FAMEDANCESTUDIOS.COM// WEBSITE: www.famedancestudios.com

MEDITATION/WELLNESS CLASS REGISTRATION FORM

PLEASE COMPLETE ONE FORM FOR EACH STUDENT REGISTERED

NAME OF STUDENT: _____

PARENT/GUARDIAN: _____

MAILING ADDRESS: _____ CITY: _____ PROV: _____ POSTAL CODE: _____

PHONE: (Home) _____ (Work) _____ (Cell) _____

STUDENT'S DATE OF BIRTH: (Month) _____ (Day) _____ (Year) _____

MEDICAL PROBLEMS: _____

EMERGENCY CONTACT: _____ (PHONE #) _____

REGISTRATION FEE: (NON-REFUNDABLE) please circle one

SINGLE STUDENT: \$25.00 FAMILY RATE: \$30.00

PROGRAMS:

- * MEDITATION/MINDFULNESS CLASS - 30 min class, once every other week if taken on it's own \$190.00 ____
- * MEDITATION/MINDFULNESS CLASS - 30 min class, once every other week if taken with another class \$165.00 ____
- * MEDITATION/MINDFULNESS CLASS - 30 min class, once every other week if in a full company program \$80.00 ____
- * STRETCH/CONDITIONING - 30 min class, once a week if taken on it's own \$300.00 ____
- * STRETCH/CONDITIONING - 30 min class, once a week if taken with another class \$260.00 ____
- * STRETCH/CONDITIONING - 30 min class, twice a week if taken on it's own \$575.00 ____
- * STRETCH/CONDITIONING - 30 min class, twice a week if taken with another class \$540.00 ____

TOTAL OF ALL FEES: (per child)

TOTALS OF ALL DANCE FEES	\$ _____	
LESS DISCOUNT OF _____(5% OR 10% if applicable)	\$ _____	(list amount removed on this line)
REGISTRATION FEE	\$ _____	
SUBTOTAL	\$ _____	
GST @ 5% (Total x 1.05)	\$ _____	
GRAND TOTAL DUE	\$ _____	
* TOTAL ELIGIBLE FOR CHILD FITNESS TAX CREDIT:	\$ _____	*GST#83427 7279

PAYMENT MUST ACCOMPANY REGISTRATION FORM EITHER IN FULL OR BY WAY OF POSTDATED CHEQUES (Maximum 6)

AUTHORIZED BY: _____

JAN ___ FEB ___ MAR ___ APR ___ MAY ___ JUNE ___ JULY ___ AUG ___ SEPT ___ OCT ___ NOV ___ DEC ___

RECOMMENDED BY: _____