



## **Kids Registration Form**

Studio Address: 1501 11th Avenue Regina, SK S4P 0H3

		KI	DS LESSONS 4-7	1					
		Septem	ber to June Dance	Year					
a minimum 4 MONTHS is required.									
Latin Dance Lessons \$75/mth a four-month minimum enrollment is required. Jan-June can be paid in full or on monthly basis.									
		a four-month minimum enrollment is Semester 1 4 months enrollment fee:	s required. Jan-June can be \$315.00 tax included	paid in full or on	Date:	S.			
		Semester 2 6 months enrollment fee:	\$472.50 tax included	□ paid	Date:		_		
		1 <sup>st</sup> month enrollment fee:	\$78.75 tax included	□ paid	Date:				
		Montly Fees thereafter: \$ 78	.75 <sub>+tax</sub> starting on:	—	- 4.00.				
Payment is due the 1st of the month for that month, unless otherwise stated.									
16	<b>.</b> !	If payment is not received by the 1st of the	•		-	-	is maid in faul		
ir paymei	nt is i	not received within 10 days, you (your child)	WILL NOT be permitted	to participat	e in dance d	ciass until account	is paid in full.		
		Method of	Payment for Danc	e Classes					
Cash: Payment in p	oerso	n at the Regina Salseros Dance Class Office.	r ayment for bane	c classes					
		will be issued every month. ** Additional fe	es will apply **						
etransfer: etranfer	rs can	be sent to admin@reginasalseros.com.							
Lundorstand and	م النب	hide by the permant schedule above an	d an the attached no	ro I roolizo t	hat if I am	dolinguont in m	v novement for classes		
		bide by the payment schedule above and ninder, and if full payment is not received							
		and I understand that every means will be	, , , ,	•			•		
•		ld must withdraw from classes, a credit v		•		e are no reranas	Initials:		
nas startear ii yot	<i></i>	ia mase witharaw nom classes, a create	viii be awaraea for ti	ie next dane	c year.				
Waiver of Liabili	itv								
l,	•		recognize and	d understand	the risks	of physical injury	inherent to dance		
and dance training	g and	I fully assume those risks. I hereby relea							
and dance training and I fully assume those risks. I hereby release Regina Salseros, event sponsors, employees, and dance teachers from all liability for injuries sustained or illnesses contracted while attending or participating in any dance classes, rehearsals, workshops, or									
		to indemnify, defend, and hold harmless							
judgments arising	fron	acts of omissions committed by me or r	ny child which result	in injury or o	damage to	any person or p	roperty.		
							Initials:		
<b>Protection of Pr</b>	ope	rty							
I understand and a	agre	that it is my sole responsibility to safego	uard my personal pro	perty while	attending	or			
participating in an	y cla	sses, rehearsals, workshops, or performa	inces. I hereby releas	e Regina Sal	seros Dan	ce Studio, its affi	liate dance studios,		
event sponsors, er	mplo	yees and dance teachers from all liability	for loss or damage t	o my person	al propert	y while attendin	g or participating in		
classes, rehearsals	s, wo	rkshops, or performances. I also agree to	o abide by any rules,	regulations a	and policie	es set forth by Re	gina Salseros Dance		
Studio.							Initials:		
<b>Medical Attenti</b>	on								
In case of physical	inju	ry or medical emergency, I hereby autho	rize Regina Salseros [	Dance Studio	to make i	necessary arrang	ements to transport		
myself or my child	l to a	$medical \ treatment \ facility \ as \ necessary.$	All such transportation	on and medi	cal treatm	ent will be at my	sole cost and		
•		mergency, or if my child is under 18 years	- ·	_		Dance Studio wil			
person(s) I have n	ame	d below as my emergency contact(s) of n	ny condition and how	to reach me	e.		Initials:		
Acknowledgeme	ent (	of Waiver							

In signing this Release, I acknowledge and represent that I have fully informed myself of the content of the waiver and hold harmless agreement by reading it before I sign it. I understand that I signed this document as my own free act and deed; no oral representations, statements, or inducements, apart from the written statements, have been made.

I further state that I am at least eighteen (18) years of age and am fully competent to sign this agreement. I execute this release for full, adequate, and complete consideration fully intending to be bound by the same. I further state that there are no health-related reasons or problems which preclude or restrict my or my child's participation in this activity, and that I will pay any medical costs that may be attendant as result of injury to me or my child. Initials:\_\_\_\_



PLEASE PRINT CLEARLY		
Signature of Participant	Date	_
Printed Name of Participant		
Signature of Parent/Guardian (if under 18)	Date	
Printed Name of Parent/Guardian		
Home Address		
Phone Number	Email Address	
Emergency Contact (if different from parent)	Relationship to Participant	
Emergency Numbers (if different from number listed above)		
Please list any medical conditions, injuries, allergies, o	etc.	



## PHOTOGRAPHY AND VIDEO RELEASE CONSENT FORM

Studio Address: 1501 11th Avenue Regina, SK S4P 0H3

## **Background**

Regina Salseros Dance Studio (RS) events, classes and/or rehearsals may be documented/recorded as an educational tool as well as for promotional and archival purposes. These recordings may be used in RS publications, social media sites, the RS website, and the media. By signing the following, parents/guardians, or participants (18 years of age and older) grant permission to RS and the media to take photographs, recordings and film footage and publish the same.

Consent			
I,guardian if participant is under 18 y statements of my child ☐ myself☐ agents for use in advertising, public	(check one) may be used by	Regina Salseros Dance Studio and	ngs and/or film and recorded
Release I agree and consent to the photograthe purpose of creating a record the its authorized agents/instructors ar incorporate the footage into other (whether by means of radio, televise)	at is available to RS and the and the formal the media to include the foregrams or not; to exhibit,	general public. I hereby authorize ootage with other footage and wi transmit, distribute, release and r	e Regina Salseros Dance Studio, ith sound effect and/or music; to
Participant's Name			
Participant's Signature (if 18 years of age or over)			
Parent/Guardian's Name (if participant is less than 18 years of	_ of age)		
Parent/Guardian's Signature (if participant is less than 18 years of	of age)		

Please print and return this completed form or email to **info@reginasalseros.com** If you have questions, please contact us at **info@reginasalseros.com**