



# Chance Dance Centre

## March Break Camp Registration

March 12-16<sup>th</sup> 2012

Name of Student: \_\_\_\_\_  
Birthday: (DD/MM/YY) \_\_\_\_\_  
Address: \_\_\_\_\_  
Name of parent/guardian: \_\_\_\_\_  
Phone number: (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_  
Email: \_\_\_\_\_  
Medical concerns/Allergies: \_\_\_\_\_  
Ontario Health Card: \_\_\_\_\_  
Emergency contact: \_\_\_\_\_

### PLEASE READ BEFORE SIGNING

I hereby certify that my child is in good physical condition and able to participate in the Chance Dance Centre March Break Camp program fully. All current medical conditions and those requiring medication are outlined on this form or attached. I release Chance Dance Centre and its teachers from liability in case of accident or injury howsoever caused. Chance Dance Centre reserves the right to place students in the most appropriate level depending on age and ability. Chance Dance Centre has my permission to use photos of my child for the school's website ([www.chancedancecentre.com](http://www.chancedancecentre.com)) and promotional material. I understand and agree that no refund will be granted after the commencement of March Break Camp.

\_\_\_\_ Half Day 8:30-12:00 pm                      Price \$148 + tax  
\_\_\_\_ Full Day 8:00- 4:30 pm                      Price \$248+ tax

Signature of parent/guardian \_\_\_\_\_  
Date: \_\_\_\_\_/2012

**PLEASE ENCLOSE CHEQUE PAYABLE TO: Chance Dance Centre**

**Chance Dance Centre  
299 Harry Walker Parkway  
Newmarket, Ontario  
L3Y 7B8  
(647) 223-2623**

