



## **REGISTRATION FORM**

**(Please legibly print below)**

DATE: \_\_\_\_\_

STUDENT NAME: \_\_\_\_\_

HOME PHONE #: \_\_\_\_\_

E-MAIL ADDRESS: \_\_\_\_\_

BIRTHDAY: \_\_\_\_\_ AGE: \_\_\_\_\_ THIS IS MY \_\_\_\_\_ YEAR AT PULSE DANCE WORKS  
(# of years)

ADDRESS: \_\_\_\_\_

CITY/TOWN: \_\_\_\_\_ PROVINCE: Ontario POSTAL CODE: \_\_\_\_\_

PARENT/GUARDIAN NAME: \_\_\_\_\_ CELL/BUSINESS #: \_\_\_\_\_

PARENT/GUARDIAN NAME: \_\_\_\_\_ CELL/BUSINESS #: \_\_\_\_\_

MEDICAL INFORMATION:  No  Yes (if "Yes", please list below medical conditions, allergies, injuries etc.):

\_\_\_\_\_  
\_\_\_\_\_

STUDENT PRIOR DANCE EXPERIENCE: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

HOW DID YOU HEAR ABOUT US: \_\_\_\_\_

I understand and agree to the registration information and policies of Pulse Dance Works Inc.: By signing this participant form, I release Nadine N. Varga, Rachel M. Lepera-Martelle, all teachers, assistant teachers, office administrators, additional staff and Pulse Dance Works Inc. from any liability actions; including injuries, disabilities, death, illness and/or lawsuits from any activity and/or travel relating to Pulse Dance Works Inc. programs including inside studio and outside studio classes, workshops, competitions, performances, dance parties and events. Pulse Dance Works Inc. will in no way be held responsible for any lost/stolen articles. I agree to notify Pulse Dance Works Inc., in writing, should any of the above information change. I also agree to grant Pulse Dance Works Inc. permission to utilize photo's taken of the above named student for promotional use at no charge today or hereafter & without any financial obligations to Pulse Dance Works Inc.

PARENT/GUARDIAN/STUDENT (if over 18yrs) SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_