



2023-24 SESSION 2 REGISTRATION FORM

This registration is for Session 2 running for 18 weeks from **February 3rd to June 15th, 2024**. Please fill out both sides of this form, and see our Pricing Breakdown document for pricing and payment plan options.

1. Student Information

Student Name: _____

Age: _____ Date of Birth: _____

Allergies/Health Concerns: _____

Parent(s) or Guardian(s): _____

Mailing Address: _____ City: _____ Postal Code: _____

Primary Phone: _____ Secondary Phone: _____

Email: _____

2. Emergency Contact (in case above parents/guardians cannot be reached)

Contact Name: _____ Relationship to Student: _____

Primary Phone: _____ Secondary Phone: _____

3. Registration Information

- This Registration is for Session 2 of dance at the Owen Sound Dance Academy: **February 3rd to June 15th, 2024**.
- Changes to your registration can be addressed on an individual basis as needed.
- Payment can be made all at once on date of registration **OR** in two (2) instalments on registration date and April 1st **OR** in a monthly plan distributed over the 5 month session, wherein the first payment must be made with your registration and all subsequent payments dated the 1st of each month starting March 1st and ending June 1st. See Pricing Breakdown page for more details.
- If two or more payments are missed, you will be asked to switch to an automatic credit card payment plan.

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4. Program Selection

Please refer to the Pricing Breakdown and Schedule and fill in the correct information for the dance classes you are registering for.

Class Name	Day	Time	Fee (/session)

Total: _____

5. Payment Options:

Please select one of the options below...

Plan 1: Payment in Full

Plan 2: Payment in Half

Plan 3: Payment Per Month

\$ _____

Due by February 1st, 2024

\$ _____

Due by February 1st, 2024
and April 1st, 2024

\$ _____

Due by February 1st, & 1st of
March, April, May, & June.

I am paying with: Cash E-Transfer Cheque Credit Card

Cheques made payable to Owen Sound Dance Academy. Email for e-transfer: hello@owensounddanceacademy.com

Credit Card Authorization A 3% processing fee will be applied to all credit card payments.

Cardholder Name _____

Cardholder Email _____

Card Number _____

Visa MasterCard Exp. _____ CVV _____

I hereby authorise the Owen Sound Dance Academy to charge my credit card the above noted fees, on the dates specified based on the payment option selected and the 3% processing fee.

Signature _____ Date _____

6. Waiver & Registration Agreement

In registering myself/my child for dance programs, I hereby release the Owen Sound Dance Academy from all claims for damages from any accident or injury which is caused by or arises from participation of the Student herein, during any program or in any facility at any location, where a program is being conducted.

I hereby agree to the selected Payment Plan above, and will make tuition payments on or before the required dates until the payments are complete.

I have read and agree to abide by the conduct guidelines and policies set out by the Owen Sound Dance Academy and will treat instructors, students and parents with respect at all times.

I hereby grant the Owen Sound Dance Academy permission to photograph and videotape the above noted Student and to reproduce these images for Academy use on the website and/or social media.

X _____

Signature of Parent or Guardian (or Student if over 18)

(must be signed in order to allow participation in any OSDA program)

Date Signed