

Sue Fay Healy School of Traditional Irish Dance

Classes Assisted by Professional Dancer Jennifer Healy from Riverdance

613-225-2106

www.suefayhealy.com

Summer 2009 Sessions

Registration Form

Dancer's Name: _____

Birthdate of Dancer (Y/M/D) _____

Class(es) _____ Day(s) _____ Time(s) _____

Home Address: _____

City: _____ Postal Code _____ Prov _____

Day Time Phone# _____ Evening Phone# _____

Email Address: _____

Parent(s)/Legal Guardian(s) Name(s): _____

Names/relationships of any other family members in the school: _____

Feis Level(s): _____

* please keep us up to date on wins/placings at fesieanna email or let the office know of any changes to feis levels*

Terms and Conditions

1. All fees are payable upon registration for the entire fall to spring term on September 10th 2008. Cheques must be post dated (Feb. 4th/09) and submitted for the 2nd term at this time There is no full refund after the second class has been attended. Fees returned under serious health conditions doctor note will be required. 2 class minimum plus a \$50.00 administration fee will be deducted
2. NSF cheques will be subject to a \$20.00 charge back fee.
3. The school and its instructors are not responsible for any injuries incurred during dance class or the premises. Dancers are expected to arrive dressed appropriately and warmed up ready and able to participate.
4. No refund will be offered for injuries incurred in or out of dance class.
5. The student and or guardian are responsible for all personal articles.
6. Dancers are to be picked up immediately after class, unless the office has been notified in advance and message has been received. If the child is not picked up at the appropriate time, the school does not accept responsibility for the child's whereabouts.

FORM MUST BE SIGNED PRIOR TO DANCER ATTENDING FIRST CLASS OF THE SESSION

Signature of Parent / Legal Guardian: _____

or

Signature of Dancer (18 Years +): _____ Date: _____

****All cheques are to be made out to Sue Fay Healy School of Dance ****

For administration use only, do not write in this space

Term 1: FALL

Class(es) _____ Total Fees Due _____ Cheque / Visa

Payment(s) Dated: _____ Date

Remitted _____

Term 2: WINTER

Class(es) _____ Total Fees Due _____ Cheque / Visa

Payment(s) Dated: _____ Date

Remitted _____

Term 3: SUMMER

Class & Level: _____ Total Fee Due _____ Cheque / Visa

Number of weeks you will be attending _____