



Junior Summer Dance Intensive 2017 | July 24 – Aug 4

Registration Form

Name: _____

Date of Birth (MM/DD/YY) _____ Female Male

Address: _____

City: _____ Province/State: _____ Postal Code: _____

Phone: _____ email: _____

Parent 1 Name: _____ email: _____

Home phone: _____ cell phone: _____

Parent 2 Name: _____ email: _____

Home phone: _____ cell phone: _____

List any medical conditions or allergies that Arts Umbrella should be aware of.

List all person authorized to pick up your child. (include your own name, note: photo ID may be required)

attending July 24 – July 28

attending July 31 – Aug 4

Method of payment: CAD \$430 Tuition Fee per week

Cheque attached (payable to Arts Umbrella)

Visa/MasterCard/AMEX

Card No. _____ Expiry Date _____

Name _____ Signature _____

REFUND POLICY: A refund will be issued, less \$150 non-refundable deposit, for withdrawal if the request is received 4 weeks in writing prior to start date. A pro-rated refund will be issued if a doctor's note is provided.

Arts Umbrella reserves the right to cancel a class should enrollment be insufficient.
Instructors are subject to change without notice.

Student: _____

Required Waivers (2010/11)

AU General Liability As a parent/guardian of a child attending Arts Umbrella Project, I have read and understood the information regarding the program and want my son/daughter to be involved in this opportunity. I realize that Arts Umbrella cannot be held responsible for students before or after class. I also give permission for my child to take part in regular class activities that take place outside of the Arts Umbrella facility in and around the Granville Island site.

Participant: In consideration of my [and/or my child(rens)] participation in this activity, I hereby release and discharge the Organization, and its representatives, successors, and assigns, from any and all liability arising from accident, injury, and illness that I (he/she) may suffer as a result of my (our) participation in this activity. I (we) also will follow the rules and regulations set by the Organization and above named parties. Parent or guardian must sign for anyone age 18 and under.

Prerequisite: I agree that the student registered for this class has met all of the pre-requisites or skill levels as outlined in the course description.

Privacy: Arts Umbrella gathers and maintains personal information for the purposes of program registration and communication about Arts Umbrella activities. Activities include advising you of fundraising initiatives, programs, services, special events, open houses, exhibits and/or performances. Arts Umbrella respects your privacy. Any information you provide to Arts Umbrella will be used and stored in compliance with British Columbia's Personal Information and Protection Act (PIPA). Arts Umbrella will not disclose your information without your consent and does not rent, sell or trade personal data about you to third parties.

I represent and warrant that I am the father/mother/guardian of _____, and have legal authority to execute this agreement and I hereby consent to the foregoing on his/her behalf.

Signature of guardian or (participant 19 or older): _____ **Date:** _____

International students: I understand that I am responsible for ensuring adequate medical coverage for the full duration of the program.

Initials: _____

I am of full legal age and have the right to contract in my own name, I have read this release prior to signing, and I am fully familiar with the contents thereof. This release shall be binding upon me, and my heirs, legal representatives, successor and assigns, and you may rely on this release.

Initials: _____

Image and Likeness Waiver: As the legal parent/guardian of my child (outlined on this registration), I hereby grant to Arts Umbrella, for the purpose of advertising and promoting Arts Umbrella, the right and permission to use and re-use, in whole or in part, my or my child's name, voice, image and likeness, as well as any recording, soundtrack, artwork, film or footage in which my child's name, voice, image or likeness appear, modified in any way, without payment or notice to me. Please Circle **Yes / No** and initial _____

Representation of Artwork/Music/Performance Waiver: As the legal parent/guardian of my child (as outlined in this registration), I hereby grant to Arts Umbrella & any employees, agents, licensees & assigns of Arts Umbrella, for the purpose of promoting or advertising Arts Umbrella, the right and permission to use & re-use, in whole or in part, artwork/music/performance produced during the course of this class/event as well as any recording, soundtrack, artwork, film or footage in which my child's artwork/music/performance appears. Please Circle **Yes / No** and initial _____

Permission to Leave the Premises

Arts Umbrella is not responsible for students before or after class time. In order to provide a safe learning environment all Dance students are required to remain under adult supervision once dropped off. Students wishing to leave the premises during their study /meal break must be picked up by a responsible adult or guardian whose name appears on their authorized pick-up list. Should you wish to grant permission for your child to leave the premises during the meal break unaccompanied by an adult please indicate below.

"I hereby authorize my child to leave the Arts Umbrella premises at meal break on his/her own accord." Please Circle **Yes / No** and initial _____

Signature of guardian or (participant 19 or older): _____ **Date:** _____

Transportation Waiver and Hold Harmless Agreement

(Required only for participants requiring Arts-Umbrella transport; ie SPARTS and SDI Advanced and Graduate Levels)

Whereas:

A) The Children's Arts Umbrella Association is a charitable organization offering art, music, and dance programs to children in the Lower Mainland;

B) The Children's Arts Umbrella Association's main facility is located at 1286 Cartwright Street Vancouver, B.C. ("the Facility");

C) Attendance in "Summer Dance Intensive" requires transportation of children by vans or vehicles, some of which are owned by The Children's Arts Umbrella Society and some of which are not ("the Vehicles");

D) The undersigned is desirous of having their children participate in The Children's Arts Umbrella Association's programs that require transportation by the Vehicles;

E) The Children's Arts Umbrella Association's ability to compensate the undersigned or the undersigned's child or children for any loss, cost, damage, expense or injury incurred while being transported in the Vehicles is limited to the insurance coverage available to The Children's Arts Umbrella Association for such purpose ("the Insurance");

The Parties agree as Follows:

1) The Children's Arts Umbrella Association agrees to transport the undersigned's child or children in the Vehicles to and from The Children's Arts Umbrella Association programs at the Facility or elsewhere, as may be required by the child's or children's attendance at The Children's Arts Umbrella Association's programs.

2) The undersigned on their own behalf and on behalf of their child or children who might be transported from time to time in the Vehicles hereby waives and hereby agrees to hold harmless The Children's Arts Umbrella Association from and against any and all claim or claims, action or actions, cause or causes of actions, demands, costs, expenses and damages of every nature and kind whatsoever which the undersigned or the undersigned's child or children may have against The Children's Arts Umbrella Association or its directors, officers, servants, agents or employees for and in respect of or in any way arising out of the transportation of the undersigned's child or children in the Vehicles, save and except such liability of the The Children's Arts Umbrella Association, its directors, officers, agents, or employees as may be covered by the Insurance.

3) It is understood and agreed that this Waiver and Hold Harmless Agreement is applicable even in the event of the negligence of Arts Umbrella or any of its directors, officers, employees, servants or agents.

Signature of guardian or (participant 19 or older): _____ **Date:** _____