

Registration Form Fall 2011

(Forms should be sent with payment no later than Monday September 12th)

Please include a separate form for each participant

Mail with Cheque or M.O. to:

ACDA P.O. Box 1045 Antigonish, NS B2G 2L6

Name Age Date of Birth
Day/ Mon/ Year

Parent(s).....

Name tax receipt to be issued to.....

Address.....
.....Postal Code.....

Ph.(home).....(work).....(cell).....

E-mail.....
(please include if you use email as ACDA sends news and reminders via e-mail periodically)

Medical conditions of which we should be aware.....
.....

I/We, the undersigned, agree not to hold Antigonish Creative Dance Association or any of its agents liable for injury resulting from or sustained by any person registered by ACDA while he/she is participating in the program.

Signature (parent or guardian, if participant is under 19 years) _____

Class:.....	Fee
..... Multiple class fee (discounted)	
..... " "	
..... " "	
..... " "	

Term total

Add Fundraising **or** Donation per child\$30.00

Cheque dated Sept 19th 2011 for Term 1 (includes fundraising)

Post-dated to 2nd term Jan 30th 2012 (registration fee only)

I would like info about how to help with: Sewing for Spring Recital