



REGISTRATION FORM 20_____

PLEASE PRINT

Last Name:	
First Name:	
Address:	
City:	
Postal Code:	
Phone Number (H)	
Phone Number (C)	
email address	

PARTNER

Last Name:	
First Name:	
Address:	
City:	
Postal Code:	
Phone Number (H)	
Phone Number (C)	
email address	

Address as above: Or

Class(es) to be taken: Session 1 is 12 weeks in length, Sessions 2 and 3 are 8 weeks in length.

- Level 1 (S1-\$270 / S2-\$180 / S3-\$180)** Tuesday 7:00 to 8:30 pm _____
- Level 3 (S1-\$300 / S2-\$200 / S3-\$200)** Wednesday 7:00 to 8:30 pm _____
- Level 2 (S1-\$270 / S2-\$180 / S3-\$180)** Thursday 7:00 to 8:30 pm _____

This payment goes toward **Lessons** _____ in session **1** _____, **2** _____, **3** _____, and/or **Membership (\$40/couple or \$20/single non-refundable)** _____.

Payment by: **Cheque** _____ **Cash** _____ **Gift Certificate** _____

Total Payment \$ _____

Turn Over Page

Please email this form to londonballroomdanceclub@gmail.com or bring it at the first class with your payment.



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How many years have you been a member of the LBDC? _____

If you are new to our Club how did you find out about us?

Website ___ Facebook ___ Friends ___ Poster ___ London Free Press ___ **Black Sign** ___ Other _____

Release and Waiver of rights in the event of loss or injury

By either registering for or participating in any program or event organized or hosted by the London Ballroom Dance Club Inc. ("LBDC") each of the undersigned, on his or her own behalf and also on behalf of his or her heirs, executors, administrators, assignees or agents, acknowledges that participating in the programs and events offered by the LBDC (such as dance lessons, club practices, trips, or club dances) can be hazardous and that he or she participates in such programs and events entirely at his or her own risk. Each of the undersigned, again on his own behalf and on behalf of the third parties mentioned above, hereby releases, indemnifies and holds harmless

- A the LBDC, its officers, dance instructors, members, employees, agents and contractors,
- B any volunteers or other individuals involved in the organization of, or participating in, any LBDC program or event

from and in respect of all actions or causes of actions, claims, demands and any other rights which the undersigned may (but for this waiver) have had against any of the persons described at A or B above because of any injury or loss suffered by the undersigned as a result of or in any way connected with participating in any LBDC program or event. This waiver extends even to injuries or losses suffered by the undersigned and caused by carelessness on the part of any of the persons described in A or B above.

Photo consent

I acknowledge that the LBDC may take my picture at LBDC events, such as dance lessons, club practices or club dances. I acknowledge and agree that the LBDC may publish or use the image for any LBDC purpose by means whatsoever including, but not limited to electronic or digital means. I acknowledge that the LBDC may not be able to control the distribution or use of the image by other than LBDC representatives. I agree that this consent and release is given in perpetuity and for no credit, acknowledgment or financial recompense now or in the future.

Privacy content

I agree to the collection of this personal information for the exclusive use of the LBDC.

Electronic messages

I consent to receive electronic messages from the LBDC, including newsletters, information, and other notifications about the LBDC.

I acknowledge having read the above statements & I agree to such statements.

Print Name _____ **Signature** _____

Print Name _____ **Signature** _____

Dated _____
mm/dd/yyyy