

SUMMER SCHOOL REGISTRATION FORM

- Half Day Program Aug. 16-20 – 8:30-12:00

Parent Name: _____

Phone # _____

Email _____

Mailing Address: _____

Child #1 Name: _____ Age: _____

Years of Experience: _____

Child #2 Name: _____ Age: _____

Years of Experience: _____

Child #3 Name: _____ Age: _____

Years of Experience: _____

PAYMENT INFO:

Cost of the 1 Week Camp Prior to July 1st = \$115.00 + GST (\$5.75) = \$120.75 per child

Cost of the 1 Week Camp After July 1st = \$115.00 + HST (\$14.95)= \$129.95 per child

Total Owing = \$ _____ Form of Payment _____

M/C or Visa # _____ Exp ____/____

Name on the Card _____

Please mail your registration to: Kelly Ann Aarts
c/o Dance Aarts Academy
Box 1046
Tavistock, ON NOB 2R0

Registrations will also be accepted by fax, over the phone or through e-mail with a Visa or MC number
Phone # 519-655-6814 Fax # 519-655-1127 E-mail danceaarts@aol.com

Dance Aarts Academy will contact you once your form has arrived. There are no returns on summer camp. We reserve the right to cancel any camp that may not have enough dancers to participate. Under these circumstances all fees will be returned.