

Miss Marguerite's Latin and Ballroom Dance

Student Registration Form

Date

Client Name(s)

Registering for (ex. Beginners Salsa)

Student Information

Cell Phone

Email Address

Gender/Pronouns (optional)

Address

City

Province

Postal Code

Occupation (optional)

Emergency Contact

I give permission for Miss Marguerite's Latin & Ballroom Dance and representative(s) to call for emergency services and my emergency contact in the event that I become in need of such care and am unable. I understand and acknowledge there are risks of physical injury associated with the activity of dance(continued on next column).

Emergency Contact Cell Phone

I voluntarily and knowingly waive all rights and causes of action of any kind including any and all claims of negligence/liability arising as a result of such activity from which could accrue to Hayley Nimmo and Miss Marguerite's Latin and Ballroom Dance/Dancecoach.ca.

Signed

Date

Special Requests (future classes)

