SUMMER SESSION REGISTRATION FORM



Please Print Clearly, complete in full, and return with all applicable fees

S	tudent's Last Name:
S	tudent's First Name:
	arent / Guardian Name:
	treet Address:
	ity: Postal Code:
H	Iome Tel #: Parent Mobile Phone #:
E	mail Address:
S	tudent's Birth Date: Student's Age:
C	SESSION SELECTION & PAYMENT INFORMATION INTENSIVE SUMMER SESSIONS – Realize Your Potential (Ages 7 to 18 Years +)
	August 11 th to 22 nd , 2025 (Monday to Friday - 9:30AM to 3:30PM) Cost of \$895
	Last Ballet Examination / Level Completed:
	Last Modern Examination / Level Completed:
	*Note: Students will be placed in Session Groups based on Age / Dance Level.
	 NURSERY SUMMER SESSIONS (Ages 3 & 4) July 14th to 18th, 2025 (Monday to Friday - 9:30AM to 1:30PM) Cost of \$325 August 25th to 29th, 2025 (Monday to Friday - 9:30AM to 1:30PM) Cost of \$325 PRIMARY SUMMER SESSIONS (Ages 5 -7) July 14th to 18th, 2025 (Monday to Friday - 9:30AM to 1:30PM) Cost of \$325 August 25th to 29th, 2025 (Monday to Friday - 9:30AM to 1:30PM) Cost of \$325
	CREDIT CARD PAYMENT INFORMATION
Ι	authorize Balletomane Inc. to process the applicable fees to my credit card (information below):
Paym	ent Type (Select One): 🗌 Visa 🗌 MasterCard 🗌 AMEX 🗌 Debit Card 🔲 Cheque
С	ard Number: Expiration Date:/
	ardholder's Name:
	ardholder's Signature:
	INSURANCE WAIVER
Ι	hereby certify that my child is in good physical condition and is able to participate fully in the
р	rogramme. I release Balletomane Inc. and its Artistic Faculty from liability in case of
a	ccident or injury. I understand that classes will be conducted in the safest possible manner by

trained, professional faculty.

Signature: ____

BALLETOMANE

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