



**Dance Program Application
902-628-8182**

Charlottetown **Cornwall** **Stratford**

For office use only
Application Rec'd ___ / ___ / ___

Student Name _____ Birth Date _____ F M
Surname Full given names Day /Month /Year

Previous Experience _____.

Terms of Admission

1. Lessons will be conducted during your child's scheduled time at our centre. Lessons are 40 minutes each at a cost of \$6.00 each. Minimum of 10 children required to offer classes at your centre.
2. A change of clothes is required as children must be able to move freely.
3. Admission into our Dance program is for the duration of the school year. Two weeks written notice is necessary to withdraw, at which time you forfeit your space.
4. Billing is done in advance on a quarterly basis and due upon receipt of invoice. Missed lessons due to absence of Dance Instructor will be made up within a week. School holidays will not be billed to your account. Student absence is non refundable.
5. IMA reserves the right to accept or reject this application and also to request the withdrawal of any child if, in the opinion of IMA, this action is deemed prudent.
6. IMA reserves the right to make such rules and regulations in the operation of the Academy, as it deems appropriate, and it is a condition of attendance that these rules and regulations be observed.
7. Please inform IMA of any changes to this Application for Admission or specifics pertaining to your child as soon as possible.
8. IMA depends upon prompt payment of fees for operating expenses. Should fees remain outstanding after the due date, IMA reserves the right to cancel enrollment and/or take action as deemed necessary to collect fees.
9. IMA requires all parents to treat the staff, children and other parents with respect and dignity at all times.

I/We have read and understand the Terms of Admission.

Dated this _____ day of _____, 20__.

Signature of Father/Guardian

Signature of Mother/Guardian

Print Name of Father/Guardian

Print Name of Mother/Guardian