



PROGRAM LOCATION-OFFICE USE

XCOMPANY PO Box 43044 RPO Kildonan Place, Winnipeg MB R2C 5G5 (204) 470-KICK info@xcompany.net

2011-2012 Registration Form & Fitness Tax Credit Receipt

(Part 1 of 3 – see reverse and separate Schedule and Fees)

Students Name _____ Parents/Guardian's Name _____
 D.O.B. (M/D/Y) _____ Grade _____ Gender _____
 Address _____ Town/City _____ Postal Code _____
 Home Phone# _____ Daytime# _____ Cell# _____ Cell# _____
 Email* _____

*As the primary method of communications, we will send *via your email*, notifications for events, weather cancellations, etc..

MB Health 6 digit# _____ 9 digit# _____

Allergies & Medical Conditions _____

Emergency Name & Phone# _____

Physical Arts Experience 1 (Type. ie. Jazz, etc.) _____ 2 years or less 3 years 5+ years
 Physical Arts Experience 2 (Type) _____ 2 years or less 3 years 5+ years
 Do you have any time conflicts with the sample schedule (Schedule and Fees Sheet)? If so, when?

How did you hear about us? _____

Suggestions for future FAMILY-BASED programs _____

CLASS NAME(S)	TIMESLOT	FEES

MULTIPLE CLASS DISCOUNTS

Please see separate Schedule and Fees Sheet.

PAYMENT PLAN

1st Today CASH/CHQ# _____

2nd Dec 1 CASH/CHQ# _____ (if 2nd payment aranged)



SUBTOTAL 1

Discounts

SUBTOTAL 2

+5% GST

FEES TOTAL

\$25 BUS PICKUP

COSTUME TOTAL

COSTUME FEE

We promise to do our best to ensure our costumes are re-wearable for public use!

1st Today CASH/CHQ# _____

\$35 All recital performance classes. Additional fees in the event of a higher priced materials

XCOMPANY REFUND POLICY

- 1) All monies will be refunded if class is cancelled due to low registration if student cannot transfer to another class.
- 2) If before the third class/week, participant decides to cancel, all monies will be returned less a \$20 admin fee.
- 3) After first 3 weeks, pro-rated refunds will be processed ONLY with a medical note or due to moving/relocation.
- 4) No refunds due to bullying or similar behaviour.
- 4) NSF Cheques- A \$25 charge will be applied to ALL NSF cheques

XCOMPANY OFFICER _____
 Must be signed for Fitness Tax Credit

DATE _____

VOLUNTEERING

XCOMPANY believes in using your gifts and talents to bless others! Parent involvement is a way to demonstrate this and a big part of what we do. Since we are a community/parent driven program, we thrive on the partnership of parents. We hope that you will consider being a part of all the great things that go on behind the scenes and on the front lines. If you are uncertain, about later in the year commitments, put yourself down anyway these are not set in stone.

How can you give of your talents? Here are some ideas.

- Costumes-sewing or finding (1 or 2 parents needed per class. An extra fee of up to \$10 per costume may be required, depending on costume type...if no volunteers are found)
- Class captain-getting info to parents/students through handouts
- Phone tree-call parents in case of class cancellations (must be available during the day)
- Newsletter creation
- Photography- taking fun pics throughout the year (requires a digital camera)
- Chaperone for events ie. Festival, school performance, etc...
- Recital committee
- Host for end of the year Wind-Up
- Other _____

BUS PICKUP

I/We understand that XCOMPANY is will pick up my child on program days only from the pickup location. I will notify the school about this arrangement. I will also notify XCOMPANY when and if my child does NOT need to be picked up. Bus transport is only to the program location. I/we will assume responsibility for picking him/her up when his/her class is finished.

AUTHORIZATION & WAIVER (must sign to participate)

I (the 'participant') understand that the XCOMPANY assumes no responsibility for injuries or illnesses which I, my spouse/partner, or my minor children or any other person may sustain as a result of my/their physical condition in this program, my/their use of any facility or my/their participation in any activities, programs, exercise, or the use of any equipment (collectively, "Activities"). I expressly acknowledge on behalf of myself, my spouse/partner, my minor children and our heirs that I assume the risk for any and all injuries, illnesses, death, loss or damage which may result from any of the foregoing. I hereby release and discharge XCOMPANY, its agents, representatives, servants, staff, volunteers and employees from any and all claims for injury, illness, death, loss or damage which I, my spouse/partner, or minor children may suffer as a result of my/their physical condition, this program, the use of any facility or participation in any Activities. I also agree to adhere to the rules, values and policies (written or otherwise) of XCOMPANY. I understand that all participants, including myself, are prohibited from possessing or using alcohol, tobacco products, non-prescription drugs, and 'live' weapons. Participants must follow safety instructions of XCOMPANY staff, representatives, and refrain from harmful behaviour. Failure to comply with XCOMPANY policies will result in immediate dismissal from XCOMPANY programs without refund. If applicable, I give XCOMPANY permission to take my child off-site and on all related field trips, I understand that the XCOMPANY is not responsible for personal property lost or stolen while members and/or program participants are using XCOMPANY locations, facilities or are on XCOMPANY premises.

PARENT/GUARDIAN/PARTICIPANT PRINTED NAME _____ SIGNATURE _____

RELEASE

By initialing here _____, I give my permission to XCOMPANY to use indefinitely, without limitation or obligation, photographs, film, footage, or electronic recordings which may include my, my spouse's or minor children's image or voice for purposes of promoting or interpreting XCOMPANY programs ONLY.

H.E.A.D.S UP Values/STUDENT Agreement (Must be signed BY STUDENT for participation in program)

Honor: I will respect and obey my parents, guardians, classmates and instructor.

Excellence: I will try my very best in what i do, while being positive.

Accountability– Coming to class ready and on time with proper attire & a good attitude. No unexcused absences.

Discipline: I will practice and work hard. I also understand that I must get rest and eat healthy.

SERVICE: I will use my gifts, skills and talents to bless others in my community.

UNITY: I will strive to promote teamwork and understand its not just about one person...me.

PEACE: I will value peace and understand that violence/bullying is not tolerated here, and can lead to expulsion.

I _____ agree to do my best to uphold the H.E.A.D.S. U.P. Values. _____

Students Signature

Date