

Name _____ New Student

Address _____

City _____ Postal Code _____

Phone _____

Email (please give us permission to contact you with important studio and performance information) _____

Classes selected: _____

New Students: How did you hear about Alma de España?

For office use only

Term 1 _____

Term 2 _____

Term 3 _____

Term 4 _____

Notes:

Please include with Registration Form & signed Waiver

- 4 post dated cheques to keep your spot in class all year/ or
- 1 cheque for 1 term

Cheques payable to Alma de España

Mailing address: 2568 Vancouver St.
Victoria, B.C. V8T 4A7

For Information please call (250)384-8832
\$25 fee charged for NSF cheques

Waiver and Release

In consideration of the acceptance of this enrollment registration, I, _____ release Alma de España, its respective servants, agents or employees from any claims, demands, damages, actions of causes of actions arising from, or in any way resulting from my participation in these Alma de España Flamenco classes not withstanding any such loss, injury or damage may have arisen by reason of the negligence of Alma de España, its servants, agents or employees.

Signature of applicant* required _____

*Note: If applicant is under 18 years of age, parent/guardian must sign.

Date _____