

DAUGHTERS OF THE NILE MIDDLE EASTERN DANCE ACADEMY

Presents

Belly Dance with AMARNA SPRING Session 2012



MONDAYS:

The Vecova Recreational Center, 3304 33 St NW (Across from the U of C)
April 2nd – June 18th (May 21st ONLY classes at 620 68th Ave NW)

12 WEEK 24 Classes Junior/Senior Troupe Sessions:

Early Bird \$300.00 before Mar 14th. \$342.00 after Mar 14th.

6:00-8:00pm ENSEMBLE PERFORMANCE TROUPE (Intermediate level.
Prerequisite, ONE YEAR TRAINING WITH AMARNA or INVITATION)

8:00-10:00pm LEAD PERFORMANCE TROUPE (Advanced level.
Prerequisite, AUDITION or INVITATION ONLY)

TUESDAYS:

The Vecova Recreational Center, 3304 33 St NW (Across from the U of C)
April 3rd – June 19th

12 WEEK Session

Early Bird \$150.00 before Mar 14th. \$171.00 after Mar 14th.

7:00-8:00pm FOUNDATIONS 1 (For first time dancers or a refresher class)

8:00-9:00pm FOUNDATIONS 2/ INTERMEDIATE TECHNIQUE
(Prerequisite, Foundations 1)

WEDNESDAYS:

The Vecova Recreational Center, 3304 33 St NW (Across from the U of C)
April 4th – June 20th

12 WEEK Session

Early Bird \$150.00 before Mar 14th. \$171.00 after Mar 14th.

7:00-8:00pm FOUNDATIONS 1 (For first time dancers or a refresher class)

Please return completed registration form & waiver, plus tuition to...
Daughters of the Nile Academy, 620 68 Ave NW Calgary, AB T2K 0N1

Please make cheques payable to Daughters of the Nile Academy

Contact Amarna at: 403-295-1545 email: amarna@telus.net

Early Bird Registration Deadline: March 14th, 2012
Registration Deadline: March 28th, 2012

**CLASS REGISTRATION AGREEMENT
BETWEEN
"AMARNA"& "THE REGISTRANT"**

Member Information- "The Registrant"

Name in Full: _____

Address: _____ City/Prov: _____ Postal: _____

Age (check one): 12-17____ 18-25____ 26-30____ 31- 40____ 41-50____ 51-golden____

Have you obtained your doctor's permission? YES _____ NO _____

How did you find out about AMARNA (circle one)? Friend / Flier / Sign / Website / Other: _____

Telephone Number (Please provide as many as possible): Home: _____ Work: _____ Other: _____

Emergency Contact & Phone Number: _____

E-Mail Address: _____

(Your email address will NEVER be sold or rented out to any other person or company and only be used for my communications with you.)

Money order or checks can be made to Daughters of the Nile Academy (no charge cards accepted). A \$30.00 fee will be applied for NSF checks. There is a NO REFUND policy once classes have started. You can make up a missed class(es) ONLY during this session of classes-no classes will be carried over into the next session. Please discuss SPECIAL requests with AMARNA.

CLASS: Foundations 1 / Foundations 2 / Multilevel / Intermediate / Advanced / Ensemble Troupe / Lead Troupe

Time: _____ Day: _____

1. Payment in full (1 payment): E-Transfer / Cash/ Cheque # _____
2. Payment in two installments: (*1st payment to be made BEFORE registration deadline. 2nd payment to be made at the FIRST CLASS OF THE SESSION*) E-Transfer / Cash/ Cheque #1 _____ #2 _____

Full payment of tuition must be received before the registration deadline or placement in class is not assured.

WAIVER AGREEMENT

For students participating in class with Amarna at the studio facilities leased/owned by S. Caruso.

Section A – By signature below, I, _____, the Registrant, being 18 yrs or older (see Section B if under 18 yrs of age), certify that I am physically able to use all facilities and do hereby agree that Stacey Caruso, Location Staff & Owners, or Location Landlords are not responsible to me for any injury, accident, or loss of personal property while on the property at 620 68th Ave. NW, Calgary, AB or The Vecova Recreational Centre, Calgary AB. I understand that I cannot transfer this membership to any other persons as a place to participate in any Belly Dance classes with AMARNA.

I do hereby release Banat El Nile Middle Eastern Dance Co., AMARNA, Stacey Caruso, Vecova Center, their employees, and their families from any claim or cause of action which may (or may have) occur (occurred) as a result of any medical problem known or unknown which I have knowledge of presently or in the future. I verify no promises or guarantees, other than those written in this agreement. I agree to follow instructional guidelines and to work cooperatively with AMARNA and other Registrants participating in classes in the building(s). Failure to do so may result in cancellation of my membership. It will be the responsibility of AMARNA to ensure your understanding of these terms.

I certify that I have read this Agreement and agree to the Terms Herein this _____ day of _____, 2012/2013 in the City of Calgary in the Province of Alberta.

_____ (Legal Registrant)

Please print and sign

Section B - The above agreement has been signed for _____ (under legal age student) who will not reach the legal age of 18 yrs until _____ (day/month/yr of birth) by the Legal Guardian or Parent _____ (Registrant's Name). Upon signing this Agreement, the Guardian/Parent of the Registrant agrees with the terms outlined in this Agreement on behalf of this under aged student. AMARNA will not be held liable or assume responsibility for any occurrences involving under aged Student or the Registrant (Legal Guardian or Parent).