

# Academy of Excellence

To register, please complete this application and return forms with appropriate payment to Balmoral Hall School, 630 Westminister Avenue, Winnipeg, MB R3C 3C1. Registrations are not accepted without class fees or payment as indicated.

**Fees:** Class fees include all activities and supplies unless otherwise noted. Classes fill quickly, so we encourage you to enroll early to ensure a space; daily or partial week registrations are not an option. (See page 2 regarding costumes.)

**Registration:** Please fill out the registration form and return to the Balmoral Hall School Academy of Excellence Office. Classes fill up early; therefore, the class fee must be received with the registration form to guarantee a spot.

**Refunds:** Refunds will not be given after the classes begin.

Applicant's Legal Name: \_\_\_\_\_  
(Please Print) Last First Middle

Name by which applicant is called: \_\_\_\_\_

Date of Birth: (MM/DD/YY) \_\_\_\_\_ Age, as of June 1, 2009: \_\_\_\_\_

School: \_\_\_\_\_

## Father or Male Guardian

Mr./Dr. \_\_\_\_\_  
Last Name First Name

Home Address: \_\_\_\_\_  
\_\_\_\_\_

Postal Code: \_\_\_\_\_ E-mail: \_\_\_\_\_

Tel: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

Cell: ( ) \_\_\_\_\_

Profession: \_\_\_\_\_

Name of Company: \_\_\_\_\_

Business Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_ E-mail: \_\_\_\_\_

Tel: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

## Mother or Female Guardian

Ms/Mrs./Dr. \_\_\_\_\_  
Last Name First Name

Home Address:  Same \_\_\_\_\_  
\_\_\_\_\_

Postal Code: \_\_\_\_\_ E-mail: \_\_\_\_\_

Tel: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

Cell: ( ) \_\_\_\_\_

Profession: \_\_\_\_\_

Name of Company: \_\_\_\_\_

Business Address: \_\_\_\_\_

Postal Code: \_\_\_\_\_ E-mail: \_\_\_\_\_

Tel: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

**Student resides with:**  Parents  Father  Mother  Residence  Guardian: \_\_\_\_\_

## Medical Information

Emergency Contact: \_\_\_\_\_ Relationship: \_\_\_\_\_ Daytime Tel: ( ) \_\_\_\_\_ Cell: ( ) \_\_\_\_\_  
(Other than the parent)

Manitoba Registration #: \_\_\_\_\_ PHIN #: \_\_\_\_\_

Out of Province Health Insurance: \_\_\_\_\_ Plan #: \_\_\_\_\_

Life Threatening Allergies:  Epipen  Medications  Chronic Medical Conditions  Other

Details: \_\_\_\_\_

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Enclosed is my payment made payable to Balmoral Hall School for the amount of \$ \_\_\_\_\_

Cash       Cheque       Student Account # \_\_\_\_\_       Credit Card

I, \_\_\_\_\_ authorize Balmoral Hall School to charge the above fees to my

Visa     MasterCard     American Express    Card Number: \_\_\_\_\_    Expiry Date: \_\_\_\_\_

Name of Financial Institution: \_\_\_\_\_

I affirm that, except as indicated, my child is in good health and able to participate in all activities. With the understanding that safety standards will be met, I release Balmoral Hall School Academy of Excellence Program and Balmoral Hall School from possible claims for injury to person or property which may arise from participation in activities and hereby covenant and agree to hold harmless Balmoral Hall School, its employees, agents, or representatives from any claim, liability, or expense arising out of, or in any way connected to, any alleged incident or injury resulting from such participation. In the event of medical treatment, if either parent or emergency contact is not available, I give Balmoral Hall School permission to transport my child to a medical emergency room for treatment. I also give permission for my child to participate in any field trips included in the activities for which she/he is registered. I consent to Balmoral Hall School's right to use any photos taken during Academy of Excellence activities for future promotions and publications. I hereby acknowledge the receipt of the Academy of Excellence Program Policies outlined in this guide. I agree to abide by these procedures and acknowledge responsibility for the payment of all program fees outlined.

Date: \_\_\_\_\_ Signature of Parent/Guardian: \_\_\_\_\_

Balmoral Hall School does not discriminate on the basis of race, religion, colour, creed, national and ethnic origin in administration of its admission/ educational policies, scholarship and bursary program, and/or any other school administered programs.

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|---|---|
| <input type="checkbox"/> <b>ART EXPLORATION 1</b> .....\$285.00.....ARTS100 SP          | <input type="checkbox"/> <b>HIP HOP 6–8</b> .....\$345.00 .....ARTS117 BC               |
| <input type="checkbox"/> <b>ART EXPLORATION 2</b> .....\$285.00.....ARTS101 SP          | <input type="checkbox"/> <b>HIP HOP 9–12</b> .....\$345.00.....ARTS118 BC               |
| <input type="checkbox"/> <b>MIXED MEDIA</b> .....\$369.00.....ARTS102 MJ                | <input type="checkbox"/> <b>CHINESE DANCE 1</b> .....\$345.00.....ARTS119 YC            |
| <input type="checkbox"/> <b>PAINTING FOR ADULTS</b> .....\$185.00.....ARTS103 MJ        | <input type="checkbox"/> <b>CHINESE DANCE 2</b> .....\$345.00.....ARTS120 YC            |
| <input type="checkbox"/> <b>BALLET 1</b> .....\$345.00.....ARTS104                      | <input type="checkbox"/> <b>MODERN DANCE CHINESE STYLE</b> .....\$345.00.....ARTS121 YC |
| <input type="checkbox"/> <b>BALLET 2</b> .....\$345.00.....ARTS105                      | <input type="checkbox"/> <b>HIP HOP TEAM</b> .....\$355.00.....ARTS127                  |
| <input type="checkbox"/> <b>BALLET 3</b> .....\$345.00.....ARTS106                      | <input type="checkbox"/> <b>JAZZ AND LYRICAL DANCE TEAM</b> .....\$355.00.....ARTS128   |
| <input type="checkbox"/> <b>MUSICAL THEATRE 1–2</b> .....\$345.00.....ARTS108 KK        | <input type="checkbox"/> <b>HEBREW AS A LANGUAGE</b> .....\$150.00.....L102 EC          |
| <input type="checkbox"/> <b>MUSICAL THEATRE 3–5</b> .....\$345.00.....ARTS109 KK        | <input type="checkbox"/> <b>FRANÇAIS ORAL POUR DÉBUTANTS</b> .....\$150.00.....L100 RB  |
| <input type="checkbox"/> <b>TAP BEGINNER 1–3</b> .....\$345.00.....ARTS111 BB           | <input type="checkbox"/> <b>CHINESE CONVERSATION BEGINNER</b> .....\$150.00.....L101 BJ |
| <input type="checkbox"/> <b>TAP INTERMEDIATE</b> .....\$345.00.....ARTS112 BB           | <input type="checkbox"/> <b>YOGA 6–12</b> .....\$150.00.....HL100 CL                    |
| <input type="checkbox"/> <b>JAZZ BEGINNER 3–5</b> .....\$345.00.....ARTS113 BB          | <input type="checkbox"/> <b>FUSION FOR MOMS</b> .....\$150.00.....HL102                 |
| <input type="checkbox"/> <b>JAZZ BEGINNER 6–12</b> .....\$265.00.....ARTS114 BB         | <input type="checkbox"/> <b>YOGA FOR MOMS</b> .....\$150.00.....HL103                   |
| <input type="checkbox"/> <b>STYLIZED JAZZ INTERMEDIATE</b> .....\$345.00.....ARTS115 BB | <input type="checkbox"/> <b>YOUNG YOGIS AND YOGINIS</b> .....\$150.00.....HL101 CL      |
| <input type="checkbox"/> <b>STYLIZED JAZZ ADVANCED</b> .....\$265.00.....ARTS116 BB     |   |