



WADE DANCE CENTRE

BELVA WADE ZENTNER

BOX 1075,

RUSSELL, MB R0J 1W0

204.773.3211 | 204.796.1399

bwadedance@gmail.com

www.wadedance.ca

CLASS 2021-2022 FEES

1st Term cheque dated today

2nd Term cheque post dated January 2, 2022

OR you can pay it all at once.

	1st Term	2nd Term	Full Year
30 Minute Class	130.00	130.00	260.00
45 Minute Class	156.00	156.00	312.00
60 Minute Class	180.00	180.00	360.00
90 Minute Class	232.00	232.00	464.00

Registration Fee per dancer \$30.00

FEES

SOLOS - \$100.00 (if you feel you are ready)

DUET - \$75.00/dancer

TRIOS - \$75.00/dancer

Includes choreography, music CD & Studio Space for up to 2 hours.

COSTUMES \$95 per Genre

NOTE: All credits from last season will be applied at the time of Registration.

*****COVID-19 - Wade Dance will follow any provincial regulations that are current during times of classes.**

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I/we the undersigned parent(s) or legal guardian(s) understand that dance requires physical exertion. It is my/our responsibility to consult with a physician before participation in dance class, productions, programs or workshops, on or off the premises.

I/we realize that participation in dance classes and activities could involve possible personal injury. Despite precautions, accidents and injuries may occur. By signing this release form, I/we assume all risks related to the use of all spaces used by Wade Dance Centre.

I/we agree to release and hold harmless Wade Dance Centre including its teachers, dancers, staff and members and facilities used by both entities from any cause of action, claims, or demands now and in the future. I/we will not hold Wade Dance Centre liable for any personal injury or any personal property damage, which may occur on the premises before, during or after classes. Furthermore, I/we agree to obey the class and facility rules and take full responsibility for my/our behaviour in addition to any damage I/we may cause to the facilities utilized by Wade Dance Centre.

In the event that I/we should observe any unsafe conduct or conditions before, during or after my/our classes, I/we agree to report the unsafe conduct or conditions to the owner, instructor or staff members as soon as possible.

I give Belva Wade Zentner and Wade Dance Centre consent to use photographs taken for promotional purposes.

Signature: _____

Dancer's Name: _____ Age: _____

Parent/Guardian Name: _____ Date: _____

Contact Numbers: _____ Email: _____

Dance Genres: _____

[Office use only: Paid by: _____ 1st term _____ 2nd term]

[Costume: _____]