



Enriching People's Lives Through Diverse Dance!
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Laya Bhava Dance Academy Application Form

(* required fields)

Student Name:*	Title	First Name	Last Name	
Birth Date:*	Day	Month	Year	
Home Address:*	Street			
	City	Province	Postal Code	Country
Home Phone Number:*	Area Code	Phone		
Mobile/Cell:*	Area Code	Phone		
Email:*				
Emergency Contact:*				
Emergency Contact's Phone Number:*	Area Code	Phone		
<p>I am aware that there is a non-refundable registration fee of 25\$. Please sign below.</p> <p style="text-align: center;">_____</p> <p style="text-align: center;">Signature Date</p>				
Waiver:*				

I hereby release LBDA from liability for personal injury, loss or damage to property howsoever caused. In an emergency, I give permission to the physician to secure proper treatment, provided efforts have been made to reach my Emergency Contact.

Please sign below.

Signature

Date

Photo Release:*

I hereby consent to and authorize the use and reproduction by LBDA, or anyone authorized by LBDA, of any and all images or photographs taken of me, and grant LBDA all rights to use these images/photographs in any medium.

Please circle: I agree I disagree

Laya Bhava Dance Academy (LBDA) is committed to protecting your privacy. We never rent, sell, share or trade our mailing lists.

Any personal information you provide is used for the purpose for which it was collected, and keep you informed of news, events and fundraising opportunities in support of LBDA.

How did you hear about us?*

Please circle:

Returning student

Internet Search

Friend/Family Member

Flyer

Witnessed a Performance

Other

If other, please specify in below.

By signing below, you are registering as a LBDA student and give consent to all of the information above.

Signature

Date