



**BERMUDA ISLANDS PIPE BAND - [www.bipb.bm](http://www.bipb.bm)**

**Irish Dancing Workshops**

**Week of July 11 – July 15, 2016**

**(Concert and Céili on July 16<sup>th</sup>)**

- Day Session (age 5+)**  
\$250 for the week – 9am – 5pm
  
- Evening Session (adults and teens)**  
\$125 for the week  
M & F – 6-8pm; T & W – 7-8pm

**LOCATION:**

Sabor Dance School

Old Berkeley Institute (corner of St. John's Road and Berkeley Hill)

**REGISTRATION FORM**

**PARTICIPANT INFORMATION** Please type or print legibly.

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_

Gender:  Female  Male Age \_\_\_\_\_

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

Grade attended year 2015-2016: \_\_\_\_\_

Home address: \_\_\_\_\_

Parish: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Cellphone: \_\_\_\_\_

Student email: \_\_\_\_\_

**Parent/Guardian name(s):** \_\_\_\_\_

**Parent/Guardian Day phone:** \_\_\_\_\_

**Parent/Guardian cell:** \_\_\_\_\_

**Parent/Guardian Email:** \_\_\_\_\_

**Persons Authorized to pick up dancer:** \_\_\_\_\_

**Other Dismissal Arrangements:** \_\_\_\_\_

**Payments:** Tuition may be paid by cash, check or direct deposit to the Bermuda Islands Pipe Band (Clarien) 4010030788

**Camp Fees:**

- **Day Session: \$250**
- **Evening Session: \$125**

**Contact Information**

For more information, contact Marisa Stones at [bipbdancers@gmail.com](mailto:bipbdancers@gmail.com)

**Medical**

**Emergency contact:** \_\_\_\_\_ **Relationship:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Specify any health problems:** \_\_\_\_\_

**Student Allergies:** \_\_\_\_\_

**Is your child on any medication? No Yes If so, please specify:** \_\_\_\_\_

**Doctor:** \_\_\_\_\_ **Phone number** \_\_\_\_\_

You have my/our permission, in the event of an emergency and in case I/we are unavailable, to authorize a physician, nurse practitioner or medical personnel to examine, interview, test and if necessary, treat my child \_\_\_\_\_ as they may deem advisable.

**Parent/Guardian name:** \_\_\_\_\_ **Date** \_\_\_\_\_

I hereby give permission to the **Bermuda Islands Pipe Band** to photograph and/or videotape the student for educational or promotional purposes. \_\_\_\_\_ (Initial)

**DANCER/PARENT STATEMENT**

I hereby state that (dancer's name) \_\_\_\_\_ is in good mental and physical health condition to participate in the activities provided by the **Bermuda Islands Pipe Band** including but not limited to all aspects of dance training. I am fully aware that any activity involving motion or athletic activity creates the possibility of serious injury. I hereby release the **Bermuda Island Pipe Band and its instructors** from liability to the above named dancer, of the person claiming through him/her, arising from injury to the person or property of the above named dancer occurring in the premises of **Sabor Dance Studio** including any event sponsored or sanctioned by the **Bermuda Islands Pipe Band**.

I understand that the **Bermuda Island Pipe Band** has the right to deny admittance to any dancer not meeting the standards of the program as it sees fit. I also agree not to hold these parties responsible in the event that my son/daughter/child engages in inappropriate conduct (including, but not limited to disruptive or volatile behavior in or out of the workshop, etc.) or becomes involved in any activity or with any persons not associated with the **Bermuda Island Pipe Band** or its scheduled program and that the **Bermuda Island Pipe Band** has the right to send him/her home for inappropriate conduct. No refunds will be given. I further attest that the information contained in this application is correct to the best of my knowledge. In addition, I have agreed to the policy and fee statement and agree to comply.

Dancer Signature (over 18yrs) \_\_\_\_\_ Date \_\_\_\_\_

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_

## **DROP OFF AND PICK UP TIMES FOR DAY SESSION**

Drop off time:

- 8:30AM – the workshop begins at 9AM daily

Pick up time:

- 5:30PM - the workshop will end at 5PM daily

## **DRESS FOR WORKSHOPS**

Dance clothing (leotard and leggings or t-shirt and shorts acceptable)

Dance shoes (ghillies/ballet slippers)

Non-slip socks (if desired) for warm-up

## **PLEASE BRING**

Water bottle

Journal

Towel

Jacket/Sweater

Day Session - Healthy Snacks and Lunch. Please note we do not allow; soda, sugary drink, candy or chips at the workshop.