Prepstudies
PLAY. MUSIC.

Musical Theatre - 2021 - 2022

Name: _____ ❑ Male ❑ Female **Age:** _____ **Birthday**: _____
Last Name First Name Month/Day/Year

Address: _____ **Email**: _____
Street Address City, Province Postal Code Parent/Guardian's email address

Parents or Guardians: _____ **Phone**: _____

WINTER SESSION			
❑ Saturday, 11:30 AM - 1:00 PM	T266 –Tache 2 Building	$375	Jan 15 – Mar 26, 2022 (no class Feb 19, 2022)
SPRING SESSION			
❑ Saturday, 11:30 AM - 1:00 PM	T266 –Tache 2 Building	$375	April 9 – June 25, 2022 (no class Apr 16 or May 21)

Policies regarding payments, withdrawals and refunds:

1. Registration and tuition payment(s) must be submitted to the Division of Preparatory Studies (Prep Studies) before class begins.
2. Refunds: Refunds will not be issued for lessons missed by the student.
3. Withdrawal: Withdrawals will only be processed for medical reasons (documentation required).
4. All late payments, dishonoured cheques, and declined credit card payments will be subject to a $25.00 administrative fee.
5. **The University reserves the right to cancel any class due to insufficient enrolment (minimum of 4 students)**

RELEASE, WAIVER AND INDEMNITY: In consideration of the University of Manitoba (the "University") accepting this application and providing instruction through the Division of Preparatory Studies, I, _____, on behalf of myself, my heirs, executors, administrators and assigns, release the University, its respective servants, agents, employees and officers, from and against any and all claims, demands, damages, actions, losses or expenses arising out of or in consequence of any loss, injury or damage to myself or my property incurred while attending or participating in the University of Manitoba Division of Preparatory Studies, except to the extent that such loss, injury or damage arose directly as a result of the gross negligence of the University, its servants, agents, employees or officers. Without limiting the generality of the foregoing, I further waive any claims for losses, injuries, damages, actions or expenses which I or my heirs, executors, administrators and assigns, may have against the University as a result of my involvement in the Division of Preparatory Studies.

I hereby authorize the University to take photographs of my child named in this application during class activities, and to display and otherwise use these photographs without charge solely for the purpose of promotional material in connection with the University of Manitoba. ☐ Yes ☐ No

I have read, I understand, and I agree to abide by all of the foregoing stipulations.

Signature: _____ On behalf of: _____ Date: _____
Parent/Guardian Name of student

Payment method: (Please indicate your choice)

☐ **Cash** ☐ **Cheque**(s) - made payable to "**The University of Manitoba."**

☐ **Visa** or ☐ **Mastercard** Credit card number: __ __ __ __ /__ __ __ __/__ __ __ __/__ __ __ __ Expiry date: __ __ / __ __

Credit Card CVD (3 digit number on back of card): _____

Name of cardholder:_____ **Cardholder signature:**_____

The personal information collected on this form is being collected under the authority of *The University of Manitoba Act*. It will be used for the purposes of registration, and communication with the student. It will not be used or disclosed for other purposes, unless permitted by *The Freedom of Information and Protection of Privacy Act*. Your personal information is protected by the Protection of Privacy provisions of *The Freedom of Information and Protection of Privacy Act*. If you have any questions about the collection of this information, please contact the FIPPA/PHIA Coordinator's Office (tel. 204-474-8339), University of Manitoba Archives & Special Collections, 331 Elizabeth Dafoe Library, Winnipeg, MB, R3T 2N2.