

**ROYAL SCOTTISH COUNTRY DANCE SOCIETY (Winnipeg Branch)****REGISTRATION FORM [July 1, 2014, to June 30, 2015]**

Registration forms and payment may be provided to the registrar:

- Drop off at the Welcome Dance;
- Drop off at your first class;
- Mail to Debbie Forrest, 146 Wildwood Park, Winnipeg, MB R3T 0E1

**REGISTRANT INFORMATION (#1)**

Name:	Card No.	
Address:		
City:	Province:	Postal Code:
Phone: (       )	E-mail:	

**REGISTRANT INFORMATION (#2)**

Name:	Card No.
Phone: (       )	E-mail:

**TYPE OF MEMBERSHIP**

Registrant 1	Fees:	Home class:	Additional class:
<input type="checkbox"/> Dancer (* \$115 class fee; \$60 membership fee)	\$175.00 *	<input type="checkbox"/> Technique	<input type="checkbox"/> Basic
<input type="checkbox"/> Membership Only	60.00	<input type="checkbox"/> Social	<input type="checkbox"/> Technique
			<input type="checkbox"/> Social
			<input type="checkbox"/> Demonstration

Registrant 2			
<input type="checkbox"/> Dancer (* \$115 class fee; \$60 membership fee)	\$175.00 *	<input type="checkbox"/> Technique	<input type="checkbox"/> Basic
<input type="checkbox"/> Membership Only	60.00	<input type="checkbox"/> Social	<input type="checkbox"/> Technique
			<input type="checkbox"/> Social
			<input type="checkbox"/> Demonstration

<input type="checkbox"/> <i>Light &amp; Airy</i> only mailed	25.00	
<b>Total Payable</b> to RSCDS Winnipeg Branch (No refunds without the approval of the Committee of Management)	\$ _____	<input type="checkbox"/> Cash <input type="checkbox"/> Cheque

**EMERGENCY CONTACT INFORMATION**

Name:	Phone: (       )
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**SIGNATURE(S)**

I understand that participation in Scottish Country Dancing requires a reasonable level of physical fitness, and if I undertake any activity beyond my personal capability, I will not hold the Winnipeg Branch or the RSCDS responsible for any resulting injuries.

Registrant 1	Registrant 2	
RSCDS Winnipeg has permission to include my name and the following information on the membership list distributed annually to members:		
<input type="checkbox"/> Address	<input type="checkbox"/> Phone number	<input type="checkbox"/> E-mail

Registrant 1	Registrant 2
Permission is granted to the Winnipeg Branch to record and use my likeness, image and performance on film, tape, still images or otherwise.	

Registrant 1	Registrant 2
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