



WHIMZ LIVE ANIMAL PROGRAM

IS COMING TO

GROOVE SCHOOL OF DANCE

DATES & TIMES:

TUESDAY'S, (10:00 AM -10:45 AM) FROM JAN 5TH – FEB 9TH, 2016

SPACE IS LIMITED

Call Ahead to reserve your spot



COST/CHILD (H.S.T. INCL.): **\$90**

(FOR THE 6 WEEK PROGRAM)

REGISTER NOW, So You DON'T MISS OUT ON SOME REAL LIVE FUN!



- ▶ A VERY **HANDS-ON, INTERACTIVE, FUN, SAFE, & EDUCATIONAL** PROGRAM.
- ▶ YOU & YOUR CHILDREN WILL MEET DIFFERENT ANIMALS EACH WEEK, PETTING, HOLDING, & EVEN FEEDING THEM.
- ▶ EXPERIENCE THE JOY & WONDERS OF THE ANIMAL WORLD THROUGH THE EYES OF YOUR CHILDREN & THE AMAZING WHIMZ ANIMALS!



CALL OR EMAIL TO RESERVE YOUR SPOT

TELEPHONE: **416-656-7894**

EMAIL: whimz@whimzonline.com



WHIMZ LIVE ANIMAL PROGRAM REGISTRATION FORM



SCHOOL:	GROVE SCHOOL OF DANCE	SESSION:	WINTER 2016
PROGRAM TYPE:	ADULT & TOT	DAY & TIME OF PROGRAM: (CHECK APPROPRIATE BOX)	<input type="checkbox"/> TUESDAY (JAN 5 – FEB 9/16) 10:00AM -10:45AM <input type="checkbox"/>

REGISTRATION INSTRUCTIONS

- CALL WHIMZ** (416-656-7894) OR EMAIL: whimz@whimzonline.com TO RESERVE YOUR SPOT ASAP, SINCE SPACE IS LIMITED.
- BRING THIS COMPLETED REGISTRATION FORM, ALONG WITH A CHEQUE TO THE 1ST DAY OF THE PROGRAM.

CHEQUE ENCLOSED FOR:	\$90.00	INCLUDES HST	PAYABLE TO: WHIMZ INC.
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- PLEASE PROVIDE THE INFORMATION BELOW:

CHILD'S NAME:	AGE:	GRADE:	TEACHER:
STREET ADDRESS:		CITY:	POSTAL CODE:
MOTHER'S NAME	CONTACT TEL#:	FATHER'S NAME:	CONTACT TEL #:
PRIMARY CONTACT EMAIL:		EMERGENCY CONTACT/TEL # (IF DIFFERENT FROM ABOVE)	
SPECIAL INFO ABOUT YOUR CHILD: (PLEASE PROVIDE ANY INFORMATION YOU THINK THE PROGRAM LEADER MAY NEED TO HELP ENSURE YOUR CHILD HAS A HAPPY, SAFE, & POSITIVE EXPERIENCE IN THE PROGRAM)			

- LIABILITY RELEASE:** (REQUIRED FOR PARTICIPATION IN THE PROGRAM)

PARENTS, GUARDIANS, & FAMILY OF THE CHILD NAMED IN THIS REGISTRATION, HERBY RELEASE WHIMZ INC., & WHIMZ PROGRAM LEADERS FROM ANY & ALL CLAIMS OF DAMAGE, LOSS, OR INJURY WHICH MAY BE CAUSED OR ARISE FROM PARTICIPATION DURING THE PROGRAM.

PARENT/GUARDIAN NAME (PRINT): _____ SIGNATURE: _____ DATE: _____