



Arbour Lake Residents Association
 12 Arbour Lake Drive NW Calgary, AB. T3G 4A3
 Ph(403)-241-2628 Fx(403)-547-8770
 info@arbourslake.com www.arbourslake.com

WINTER PROGRAM REGISTRATION 2024

Participant Information

Name _____ **Age (if under 18)** _____

Address

Emergency Contact Name & Phone _____ **Cell Phone** _____

Allergies, Illness, Behavioral Problem

Email (Required to send out reminders for class start)

Would you like to receive email updates on events and programs at Arbour Lake? Yes No

I give permission to have photos taken to be published in the Arbour Lake Residents Association Newsletter. Yes No

Program	Time	Cost
Parents & Tots	<input type="checkbox"/> 10:00-10:30	\$60
	<input type="checkbox"/> 10:45-11:15	
	<input type="checkbox"/> 11:30-12:00	
Level 1	<input type="checkbox"/> 12:30-1:15	\$65
Level 2	<input type="checkbox"/> 1:30-2:15	\$65
Level 3	<input type="checkbox"/> 2:30-3:15	\$65

**Classes Run Saturdays
 January 6 – February 3, 2024**

Method of Payment:

Cash Chq # _____

Debit MC/Visa Auth # _____

Total:

Acknowledgement, Release and Waiver In consideration of permission, granted now or in the future by the Arbour Lake Residents Association to participate in the above program during the year 2024 I agree and acknowledge that (1) there is nothing to my knowledge that indicates that I have not met all the prerequisites required for participation in the program. (2) I will abide by the rules and regulations imposed on the participants in the program. (3) I freely and voluntarily assume any risks and hazards inherent in the nature of the program and accordingly my participation in the program shall be entirely at my own risk. (4) I waive any claim I may have against the Arbour Lake Residents Association including the staff, associates, agents, consultants and or instructors arising from my participation in the program and agree to indemnify and save harmless the Arbour Lake Residents Association and including the staff and associates for any claim, whatsoever, arising from my participation in the program. **(5) I am aware that the registration fee is NON-REFUNDABLE unless the program is cancelled by the Arbour Lake Residents Association.** (6) This RELEASE, WAIVER OF CLAIM and ASSUMPTION OF RISK are binding on me, my heirs, and my executors, administrators, personal representatives, and assigns.

Participant Signature or Parent/Guardian (if under 18)

Date

