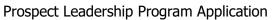
## CANADA'S NATIONAL ACADEMY OF DANCE EDUCATION





APPLICANT PARENT/GUARDIAN INFORMATION																			
Last Name				First					M.I										
Street Address												Apa	Apartment/Unit #						
City						Prov.				PC									
Phone							E-mail Address												
APPLICANT INFORMATION																			
Last Name								First				M.I			DOB DMY				
Street Ad											Apa	Apartment/Unit #							
City						Prov.	F					PC				·			
Is the ap	a Canadian citizen?					N	NO Does			oes the applicant hold a OSS			SS Dip	loma	?	-	YES 🗌	NO 🗆	
Has the a	арр. ар	oplied for the PLP before?					N	IO If not, incl. date of Grad.											
APPLIC	CANT	EDUC	CAT	ION															
High Sch	School			Address															
From		To Did you graduate?		graduate?	YE	YES N													
Elem.				Ad	Address														
From		To Did you graduate?		YE	ES 🗌	NO	NO 🗆												
Other					A	ddress													
From		Т	To Did you graduate?		graduate?	Υ	ES 🗌	NO 🗆											
APPLICANT REFERENCES																			
Please lis	st one r	non-rei	lativ	e referen	ce and at	tach a reco	mm	endation	lette	er froi	n this re	feren	ce to	this ap	oplica	ition.			
Full Name							R	elationsh	iip										
Company	Company								Pl	none									
Address	ddress																		
APPLICANT SKILLS/TRAINING/CERTIFICATION																			
CERT.							ganizatio	n											
From		-	То		Certific		1	YES			Leve	el							
CERT.				Organizatio		n													
From		-	То		Certific Current		١	YES		NO	Leve	el							
CERT.	CERT.			Org	Organization														
From		-	То		Certific		١	YES		NO	Leve	el							

APPLICANT CURRENT/PREVIOUS EMPLOYMENT OR VOLUNTEER WORK														
Organization									Job Title					
Address						Year								
Responsib	ilities					1								
Organizati	on					Job Title								
Address								Year						
Responsib	ilities													
APPLICANT DANCE EDUCATION														
Style						Studio								
From			То		Exam Work	YES	NO		Highest Level					
Style				ı	1	Studio								
From			То		Exam Work	YES	NO		Highest Level					
Style				ı	1	Studio								
From			То		Exam Work	YES 🗆	NO		Highest Level					
Style						Studio								
From			То		Exam Work	YES 🗆	NO		Highest Level					
Style				Studio										
From			То		Exam Work	YES 🗆	NO		Highest Level					
Style					1	Studio			'					
From			То		Exam Work	YES 🗆	NO		Highest Level					
						1			'					
PAREN	PARENT/GUARDIAN DISCLAIMER AND SIGNATURE													
I certify that the above answers are true and complete to the best of my knowledge and that my child hereby named above will be 13-19														
years of age by September 11th 2017.														
If this application leads to acceptance for my child, I understand that false or misleading information in my application or interview may result in my release from the program, where in which no refund or reimbursement of fees will be issued.														
Guardian Date														
APPLICA'	TION	CHEC	(LIS	Γ – Please	email completed a	pplications to i	nfo@cna	adedu	com no later than April 30 <sup>th</sup> , 2017.	All candidates who apply				
are invite	ed to S	stage 2	the	in-persor	n audition which wi	ii take place on	Sunda	ıy, M	y 14 <sup>th</sup> , 2017. More info will follow.					
	Cor	nplete	d Ap	plication F	orm includes 1 refe	erence								

are mivice	a to Stage 2 the m-person addition which will take place	e on Sunday,
	Completed Application Form includes 1 reference letter attached	
	Copies of most recent Exam Certifications.	
	Scholarship Application (optional)	
	Waiver, Elements of Risk and Signature From	
		-

Waiver, Elements of Risk and Signature							
With the acceptance of this application and the permission given to have my child							
Move Dance Company (B2M Dance Co.) and Canada's National A waive and forever discharge the Born to Move Dance Company, C and all of their members against all claims (i.e. liability, damages, result of or in any way connected with my child's participation in ar this registration form, I acknowledge having read, understood and indemnity. I warrant that my child is physically fit to participate in s that there are risks associated with it which I hereby agree to entire understand the physical risks involved in this activity and I do not he Canada's National Academy of Dance Education accountable for a participation in this event.	Canada's National Academy of Dance Education costs etc.), howsoever caused, arising as a my dance or dance related activity. By submitting agreed to the above waiver, release and such activity and acknowledge that I am aware ely assume as my own personal responsibility. I hold the Born to Move Dance Company or						
The Born to Move Dance Company and Canada's National Acade involves certain elements of risk. Accidents may occur while partic cause injury. A few examples of the type of injuries which one is a activity are:	cipating in this activity. These accidents may						
Activity related (e.g., minor cuts and abrasions, sprains ar serious injuries affecting the body. Some head, neck, or back injur threatening.)							
These injuries result from the nature of the activity and can occur without any fault on either the part of the dancer, or the Born to Move Dance Company, Canada's National Academy of Dance Education, its affiliates, its employees or agents, or the facility where the activity is taking place. By choosing to allow you or your child to participate in this activity, both you and the child (thereby named above) are assuming the risk of an injury occurring.							
Carefully following instructions at all times and being physically fit chance of an injury/accident occurring.	to participate in the activity can reduce the						
Guardian Signature:	Date:						