

**Celebrating the RSCDS 100<sup>th</sup> Anniversary and Winnipeg Branch 60<sup>th</sup> Anniversary**  
**ROYAL SCOTTISH COUNTRY DANCE SOCIETY (Winnipeg Branch)**  
**REGISTRATION FORM July 1, 2022 to June 30, 2023**



Registration forms and payment may be provided to the registrar:

- Mail to: Doug Durnin 11 Pembridge Bay Winnipeg MB R2M 4H1 ph. 204-253-4213
- Or drop off at the welcome dance or your first class.
- **Membership list will be published mid-October, please register by Sept. 30th.**

**REGISTRANT #1 INFORMATION**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: _____	Province: _____	Postal Code: _____
Phone: (        ) _____	E-mail: _____	

**REGISTRANT #2 INFORMATION**

Name: \_\_\_\_\_

Phone: (        ) _____	E-mail: _____
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**TYPE OF MEMBERSHIP**

<b>Registrant 1</b>	<u>Fees:</u>	<u>Home class:</u>	<u>Additional class:</u>
<input type="checkbox"/> Dancer full term (\$100 class fee; \$60 membership fee)	\$160.00	<input type="checkbox"/> Monday evening	<input type="checkbox"/> Monday evening
<input type="checkbox"/> Dancer half term (\$ 60 class fee; \$60 membership fee)	\$120.00	<input type="checkbox"/> Thursday pm	<input type="checkbox"/> Thursday pm
No post-dated cheques, 2 <sup>nd</sup> payment due first class in January	\$ 60.00		
<input type="checkbox"/> Membership Only	\$ 60.00		

<b>Registrant 2</b>	<u>Fees:</u>	<u>Home class:</u>	<u>Additional class:</u>
<input type="checkbox"/> Dancer full term (\$100 class fee; \$60 membership fee)	\$160.00	<input type="checkbox"/> Monday evening	<input type="checkbox"/> Monday evening
<input type="checkbox"/> Dancer half term (\$ 60 class fee; \$60 membership fee)	\$120.00	<input type="checkbox"/> Thursday pm	<input type="checkbox"/> Thursday pm
No post-dated cheques, 2 <sup>nd</sup> payment due first class in January	\$ 60.00		
<input type="checkbox"/> Membership Only	\$ 60.00		

<b>Total Payable</b> to RSCDS Winnipeg Branch (No refunds without the approval of the Committee of Management)	\$ _____ Receipts provided for cash only	<input type="checkbox"/> Cash <input type="checkbox"/> Cheque
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**EMERGENCY CONTACT INFORMATION**

Name: _____	Phone: _____
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**Please ensure each applicant completes and signs all 3 fields below.**

**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.**

**Out of respect for my fellow dancers, I have been fully vaccinated for the Covid-19 virus.**

Registrant 1	Registrant 2
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RSCDS Winnipeg has permission to include my name and the following information on the membership list distributed annually to members:

Registrant 1 <input type="checkbox"/> Address <input type="checkbox"/> Phone number <input type="checkbox"/> E-mail	Registrant 2 <input type="checkbox"/> Address <input type="checkbox"/> Phone number <input type="checkbox"/> E-mail
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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 <input type="checkbox"/> yes <input type="checkbox"/> no	Registrant 2 <input type="checkbox"/> yes <input type="checkbox"/> no
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