

REGISTRATION FORM - DANCERS

International Scottish Country Dance School
King's Edgehill School, Windsor, Nova Scotia, Canada
Wed/July 28 – Sun/Aug 1, 2010

| |
|--|
| Name |
| Address |
| CityProvince/StatePostal Code..... |
| Home Phone (.....).....Country..... |
| Email address |
| Please print very clearly |

| REGISTRATION RECEIVED | | |
|-----------------------------------|--------------------------------------|----------------------|
| Number of Persons | Before Nov 1, 2009 | After Nov 1, 2009 |
| _____ Resident ----- | @ \$540 Cdn | \$565 Cdn |
| _____ Non-Resident ----- | @ \$255 Cdn | \$280 Cdn |
| _____ Non-Dancer ----- | @ \$270 Cdn | \$295 Cdn |
| _____ Youth Half Price | (All prices in Cdn funds, tax incl.) | |
| _____ 1) Historic Tour @ \$30 Cdn | \$75 Deposit each | |
| _____ 2) Winery Tour @ \$35 Cdn | requested with Registration | |
| _____ 3) Nature Tour @ \$20 Cdn | Amount Enclosed: _____ | |
| (See Flyer for Tour Descriptions) | Balance Due: March 31, 2010 | |

Level of Class: Intermediate ___ Experienced Social ___ Advanced Technique ___ Youth ___ (See Flyer for Class Descriptions)

I would like a Single ___ Twin ___ room. Sharing with (or near):

I wish to reserve a Single ___ Twin ___ room for _____ nights before and _____ nights after ISCDS **Excursion** No ___ Yes ___ (Please specify above)

Dietary Restrictions (Allergies)? _____ **Menu Preference for Friday's Dinner:** Lobster ___ Alternate Menu ___

| | | | | |
|--|------------------------|------------------------------------|----------------------------------|----------------------------------|
| Non-Residents: (meals are extra) | Wed: Dinner ___ | Thurs: Lunch ___ Dinner ___ | Fri: Lunch ___ Dinner ___ | Sat: Lunch ___ Dinner ___ |
|--|------------------------|------------------------------------|----------------------------------|----------------------------------|

I wish to receive my Confirmation Material by: Email ___ Postal Mail ___

My address information (email, postal, phone) may be published for other attendees: Yes ___ No ___

| | |
|--|------------------------|
| I understand that the R.S.C.D.S. Nova Scotia Branch is under no liability whatsoever in respect of any personal loss or injury which I may sustain and I agree to abide by any regulations that may be made. | Signature |
|--|------------------------|

| | | |
|--|---|--|
| Make Cheque or Money Orders payable to: ISCDS A non-refundable \$75 Cdn deposit (per person) is requested with registration <i>Balance to be received by Mar 31st, 2010</i> | Please forward this form and payment to: ISCDS 2010 Coordinator Ms Lydia Hedge 624 Three Fathom Harbour Rd. RR#2, Head of Chezzetcook Nova Scotia, Canada B0J 1N0 | If you are interested in using the shuttles being organised by ISCDS between the airport or Halifax and King's Edgehill School, please get in touch with the Coordinator. |
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For more details, please see the school website: http://www.rscdsnovascotia.ca/ISCDS_2010/ISCDS10.html

Please photocopy this form for friends