

Signature

Crestmont Hall Program Registration

12400 Crestmont Blvd SW Calgary, AB T3B 5W5
Phone: 403-475-7320 Email: admin@crestmonthall.com
Website: www.crestmonthall.com

Program: Paint Night Participant Name: Name of parent of guardian (if participant is under 18*): Address: Phone: **Emergency Contact Name & Phone Allergies, Medical Concerns Email** Would you like to be added to our email list for information on upcoming programs and events? Yes No 🗌 I understand that by signing this registration form, I release and hold harmless Crestmont Homeowners' Association, and its directors, employees, instructors, volunteers and all other persons or entities acting for them from any and all claims, demands, suits, cost and charges, in connection with or arising from my participation in the program. I voluntarily assume any and all risks and/or hazards that may be present and my participation will be entirely at my own risk. I agree that there is nothing to my knowledge deems me unfit to participate in the program. I will abide by the rules and regulations outlined by this program. I am aware that the registration fee is **NON-REFUNDABLE** unless the program is cancelled by the Crestmont Homeowners' Association. The Crestmont Homeowners' Association reserves the right to cancel any class and refund the registration fee.

Date

Credit Card Authorization

Please complete all fields. You may cancel this authorization at any time by contacting us. This authorization will remain in effect until cancelled or event account is settled

Signature	Date
authorize Crestmont Hall to charge my credit card above for the agreed upon event services. I understand that my information will be saved to file until my event account is settled.	
CVC	
Expiration Date (mm/yy)	
Card Number	
Cardholder Name (as shown on card)	
Event Date	
Name	