

AIDA SATURDAY “PURE DRAMA, an intro to Acting & Skill Building” 2024-2025

Instructed by AiDa Founder | Director; Kaime Sherman

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PLATINUM, DIAMOND, GOLDS AWARD 2020-2023 BEST ART SCHOOL/INSTRUCTION, KIDS ACTIVITIES, SUMMER CAMP, KIDS CAMPS, CHILDREN’S ENTERTAINMENT, LIFE COACH, The Hamilton Spectator Reader’s Choice Awards++++ 5 STAR GOOGLE REVIEWS

Kaime Sherman is an Artist, Author, Mentor, Certified Life Coach, Nominee 2017-2023 The City of Hamilton Arts Awards: CREATOR | Arts Innovation | Community Leadership and recipient 2015 YWCA Women of Distinction Award | Arts Culture Award, AFW recipient Community Appreciation Award/Arts and Culture.

Graduate of the American Academy of Dramatic Arts, she has served as an adjudicator for their NY and LA campuses for over 25 years and spent a lifetime working professionally in theatre, television, film. Paying knowledge gained from master instructors is her mission creating AiDa to give back to community a help students develop confidence and inspire their imaginations.

Kaime’s DREAM was to create mission-driven arts education for all. AiDa is about boosting confidence, inspiring arts appreciation, creativity, collaboration and community!

I give
permission for my child (**PLEASE PRINT FULL NAME**)

to attend AiDa | Academy of Imagination & Dramatic Arts, **Saturday PURE DRAMA, an intro to Acting & Skill Building**, held at Churchill Clubhouse, 169 Cline Ave. North-Westdale in Hamilton, Ontario.

Payment required whether in attendance or not once registered, as a spot has been reserved for your child. Any cancelled class by Drama Coach or inclement weather will be rescheduled at a mutually convenient time as arranged with the City of Hamilton with whom AiDa rents space at the Clubhouse.

Students may bring a friend for ONE FREE class to see if they would like to sign up! *If your child will be absent or late, please notify Drama Coach via text at 905.975.2313 before the time of class for attendance.

A CODE OF CONDUCT IS ALSO AVAILABLE ON OUR WEBSITE and should be printed, signed and returned to the instructor or our office.

Payments can be made via E-transfers to: aida.hamont@gmail.com (*automatic deposit in place*) or by cash or cheque. Payment/or payment arrangements (*if necessary*) are required before first class of each session. There is a \$30 NSF Charge for any returned cheques.

Students are not considered registered until payment is received.

RESERVE YOUR CHILD’S SPOT NOW! Wait Lists are also common as we have limited space. ACT NOW!

Location: Churchill Park Clubhouse, 169 Cline Ave. North (Westdale) Hamilton, ONT.

FALL 2024 Session: October 19, 26, Nov. 2, 9, 16, 23, 30, Dec. 7 (Makeup class should instructor require Dec. 14)

WINTER 2025 Session: Feb. 8, 15, 22, March 8, (off March Break), March 22, 29, April 5, 12 (April 26 should Makeup class be required by instructor).

SPRING 2025 Session: April 26, May 3, 10, 17, 24, June 1, 7, 14.

EIGHT CLASSES PER SESSION (most students every session)

Cost: \$199.00 (plus HST) totals: \$224.87


Class Time: Saturdays, 12:30pm-2:30pm (2 hours)

Cancellation Policy: 50% refund when cancellation is received more than 2 weeks BEFORE session begins. No refunds once session begins.

We value the health and safety of our students, parents and volunteers. If your child presents any signs of cough, diarrhea, sore throat, fever, vomiting or nausea please keep them home.

Class for ages 6-12	*What is your child's age:	Birthdate:	Current Grade:
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Special instructions for my child: Any theater experience? Please share:

*Each child should come with a refillable water bottle to stay hydrated, comfy clothes & ready to have fun! 

Has your child experienced, or are they currently experiencing, any of the following conditions?

ADHD/ADD	Yes:	No:	Details:			
Allergies	Yes:	No:	Details:			
Anxiety	Yes:	No:	Details:			
Asthma Details:	Yes:	No:	Details:	Epi-Pen	Yes:	No:
Shyness:	Yes:	No:	Details:			
Mental Health issues	Yes:	No:	Details:			
Behavioral Issues If yes, describe what accommodations work to aid in your child's success within a group setting:	Yes:	No:	Details:			
Hearing problems	Yes:	No:	Details:			

Vision problems Yes: No: Details:

Eating Disorder Yes: No: Details:

Physical injury or pain Yes: No: Details:

Require any medication

While at class or camp Yes: No: Details:

Has your child ever been bullied? If so, how has this affected your child? Yes: No:

**Emergency contact for (Student -Please print) _____ Permission for
emergency treatment if necessary:**

Full Name Parent or
Guardian to
contact/Cell

List of contacts _____ and numbers

Doctor + Phone _____

Health Card Number _____

Signature Parent/Guardian: _____

Participant's Release Form for Emergency Treatment IF Parent or Guardian cannot be reached:

I am the parent or legal guardian of _____ (the student) _____ who is under 18 years of age, and desire that the student participate in the full program activities of AIDA-Academy of Imagination & Dramatic Arts programming. I acknowledge there may be a risk in participating in activities and I therefore will not hold AIDA or instructors responsible for any injury, sickness or accident to the student and for any loss or damage to personal property resulting from the student participating in the activities. I also give the instructors of AIDA permission to secure medical treatment beyond first aid, should medical attention be required. I hereby release AIDA-Academy of Imagination & Dramatic Arts and it's instructors from any and all claims for libel and invasion of privacy in connection to participating.

PRINTED NAME & SIGNATURE OF PARENT OR LEGAL GUARDIAN (if student is under 18 yrs. of age)

DATE _____

PHOTOGRAPHY PERMISSION RELEASE: AIDA DRAMA KIDS SHINE!!!!

I as parent or legal guardian of _____ (the student) who is under 18 years of age, give permission for AIDA and it's instructors to use any **photography** of the student in class to be used primary for the purpose of AIDA-Academy of Imagination & Dramatic Arts multi-media advertising, web site or Facebook page for the sole purpose of promoting activities in our programming.

PLEASE CHECK HERE and write YES, IF YOU AGREE THAT WE CAN USE YOUR CHILD'S IMAGE (*no names ever given*) for AIDA PROMOS:

YES: _____

FOLLOW US ON INSTAGRAM and Socials @aida.hamont !!!!!

*****IMPORTANT! Check here and WRITE NO, if you DO NOT WANT YOUR CHILD IN ANY PHOTOS for AiDa promotion!**

YOUR EMAIL:

HOW DID YOU HEAR ABOUT AIDA

Programming? _____

*We always appreciate your support with a positive Google Review! We have been selected 2020-24 by the CBRB Best Businesses in Canada for the Silver Award for maintaining a 4.8+ STAR GOOGLE Review Rating for customer satisfaction. We have maintained a 5 Star on Google!!! Help keep the magic spreading!

FOR OFFICE USE:

Drama Workshop Method of

payment: _____

Check here to request receipt of payment _____