

ENROLMENT FORM 2012

NAME OF STUDENT

DATE OF BIRTH

POSTAL ADDRESS

PARENTS/ GUARDIANS

<input type="text"/>	<input type="text"/>
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CONTACT EMAIL ADDRESS FOR ALL CORRESPONDENCE

PHONE CONTACTS

MOBILE	HOME/ BUSINESS	EMERGENCY CONTACT
<input type="text"/>	<input type="text"/>	NAME
<input type="text"/>	<input type="text"/>	MOBILE

STUDENT - HEALTH CONCERNS

NIL

PHYSICAL/ EMOTIONAL

LEARNING CONCERNS

FAMILY CONCERNS

CLASSES FOR 2012- Please list the name of class with genre

Ballet	Tap	Jazz	Hip Hop	Contemporary
Preschool	Prep	Company	Pointe	Other

PARENTAL/ GUARDIAN CONSENT- (please tick)

- I agree to support the uniform and standards of dress requirements at Dance Dynamics
- I will assist in the learning process of my child by encouraging respect for staff and fellow dance students at dance Dynamics
- I consent for photographs / DVD of my child to perhaps be used in the studio premises or in promotional material for Dance Dynamics
- I will reinforce to my child the need to abide by the rules and guidelines of Dance Dynamics as noted on the web site and general information within the dance studio
- I understand that my child as noted on this form may participate in dance classes and events that involve Dance Dynamics at his / her own risk and that rules are in place to encourage safety in the environment of the dance studio and its surrounds.

PARENT/ GUARDIAN

NAME _____

SIGNATURE _____

DATE _____