

# REGISTRATION FORM 2010

## Personal Details

Child's Surname:

Given Names:

Age (What age will they turn in 2010):

Date of Birth:

Parents/Guardian Names:

Address:

Contact phone numbers.

Home:

Work:

Mobile:

Fax:

Email address for newsletters (this is the only way to receive all the latest information).

PLEASE PRINT CAREFULLY:

## Dance History – new enrolments only

Please include years of experience, type of syllabus, exam results, dance type jazz, tap, classical)

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## Enrolment

Please **number** in order of preference. I wish to enrol my child in;

Jazz

Ballet

Tap

Hip Hop

Street Jazz

Street Tap

## Medical History

Please list any injuries/medical condition known at present.

I have read the information provided in the Brochure and I agree to the conditions as outlined

\_\_\_\_\_  
Signature  
Parent/Guardian/Adult Student

Where did you hear about Dance wEST03? Please tick the applicable box/es.

Yellow Pages

School Newsletter

Radio

Newspaper

Posters

Other\_\_\_\_\_

FOR OFFICE USE ONLY

ENROLMENT DATE

NON REFUNDABLE REGISTRATION FEE PAID

FEE CODE