

Registration Form

| Student Name | | | | D.O.B. Sex M/F | |
|---------------------------|---------------|-------|-------------|-------------------|--|
| | ficial Use Or | | | | |
| Pin Numbers (<i>Of</i>) | iciui Use Or | (IIY) | | | |
| ISTD Pin No. | | | RAD Pin No. | | |
| | | | | | |
| Classes Attende | d | | | | |
| | | | | | |
| | _ | | | | |
| Parent / Guardia | an Name | | | | |
| | | | | | |
| Email | | | | | |
| Address | | | | | |

| Post Code | |
|---------------------|--|
| Telephone Mobile | |
| Mobile | |

| School | Attended |
|---------|-------------|
| 2011001 | / literiaca |

Medical Conditions / Allergies / Special Educational Needs (please included any medication)

| Doctors Name | |
|----------------------|--|
| Doctors Address | |
| | |
| Doctors Phone Number | |

Emergency Contact Information

| Name of contact | |
|-----------------|--|
| | |

| Relationship to Student | |
|-------------------------|--|
| Telephone | |
| Mobile | |

Additional Information

(This information is optional however it will help us to provide the best possible service)

Have You Attended any other Dance / Drama School? (Y/N)

Name of Dance/Drama School Do you still attend classes there? (Y/N) What are the classes you attend

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|---|--|--|

Terms and Conditions

- Fees are paid every half term, not including holidays.
- All Fees are payable in advance at the first class of the new half term block.
- A half terms notice is required, in writing, for the withdrawal of your child from classes or payment of fees in lieu of notice.
- No reduction of fees is made in the case of absence. The payment secures the place of your child for the entire seven week block.
- Any photos taken may be used for the purpose of promotion of Dance Arena. NO NAMES WILL BE USED.
- A certain amount of physical contact is necessary whilst learning a practical skill such as dance to ensure safe methods of learning and performance. All contact with your child will only be when necessary and conducted in a professional manner. No hands on contact will be made without first telling the pupil what is about to take place. By signing below you are accepting this necessary teaching aid as one of the terms and conditions of the classes attended.

| Signed (Parent / Guardian) | |
|----------------------------|-----|
| Date | / / |