

**BW Dance - Enrolment Form**



I have read and understood all of the information, terms and conditions stated in the 'BW Dance - Enrolment Information'

STUDENT NAME.....

ADDRESS.....POST CODE.....

EMAIL ADDRESS.....

TELEPHONE MOBILE/HOME.....

DATE OF BIRTH.....

PARENT/ GUARDIAN CONTACT NAME.....

DOES YOUR CHILD HAVE ANY ALLERGIES/MEDICAL CONDITIONS/INJURIES? YES  NO

IF 'YES' PLEASE PROVIDE DETAILS:.....  
.....  
.....

I GIVE PERMISSION FOR MY CHILDS PHOTOGRAPHS TO BE USED IN ADVERTISING

YES  NO

HOW DID YOU HEAR ABOUT BW DANCE?.....

I AS THE LEGAL PARENT/GUARDIAN OF THE ABOVE STUDENT AUTHORISE HER/ HIS ENROLMENT IN CLASSES AND RELEASE 'BW DANCE' AND ITS TEACHERS OF ALL LIABILITY DUE TO PERSONAL INJURY OR LOSS OF PROPERTY

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SIGNED (PARENT/ GUARDIAN)

.....

DATE (dd/mm/yy)