

Step Up and Dance

2018

Enrolment Form B

Student Information (please complete clearly)

Student Name		Date of Birth	Age
Mailing Address		Suburb	Post Code
Parent(s) Name		Phone AH	Mobile
Emergency Contact(s)		Phone AH	Mobile

EMAIL ADDRESS

CLASSES	PLEASE TICK	CLASSES	PLEASE TICK	CLASSES	PLEASE TICK
INTERMEDIATE		SENIOR		Senior Company (Ballet and Jazz is a requirement)	
Ballet		Ballet			
Contemporary		Contemporary			
Pointe		Pointe		Private Lessons	
Stretch and Strength		Jazz			
Tap		Tap			
Jazz		Hip Hop			
Hip hop					
Acrobatics		Acrobatics			
Cheerleading		Cheerleading			
Tumbling		Tumbling			
Aerial		Aerial			

<p>I/We have read the Step Up and Dance Policy & Guidelines Statement/handbook and understand the contents of this Statement/hanbook. I/We the undersigned certify that my/our child is in good health and may participate in the activities at Step Up and Dance. In case of an emergency requiring medical treatment the undersigned hereby authorises the Teachers of Step Up and Dance to have the student taken to a medical or hospital facility for treatment.</p>	
<p>Name _____ Signature _____ Date: _____</p>	

Does your child have any medical condition(s) that we should be aware of? (please describe):

