DANCE FACTORY
JUNIOR & TEENAGE
ENROLMENT FORM 2024
PLEASE PRINT CLEARLY AND COMPLETE ALL SECTIONS
STUDENT DETAILS:

First Name:

Surname:

Address:

Suburb:

State:

Postcode:

Home Phone:

Mobile:

Email:

Date of Birth:

Age as of 1/1/24:

Gender (please tick): **M** ☐ **F** ☐

How did you hear about Dance Factory?

PERSON RESPONSIBLE FOR FEES:

First Name:

Surname:

Address:

Suburb:

State:

Postcode:

Home Phone:

Mobile:

Email:

Relationship to Student:

EMERGENCY CONTACTS:

Name:

Relationship:

Phone:

Name:

Relationship:

Phone:

DANCE TRAINING: have you had any previous training? **Y** ☐ **N** ☐ (if yes please specify)

Style	Years of Training	Classes per week	School or Teacher
Jazz			
Ballet			
Hip Hop			
Tap			
Other-			

225 Swan Street, Richmond VIC 3121
PHONE: 03) 9429 9492
E-MAIL: dancefac@netspace.net.au
WEBSITE: www.dancefactory.com.au

PLEASE LIST CLASSES YOU WOULD LIKE TO ENROL FOR:			
Class	Day	Time	Age group

Are there any Medical Conditions we should be aware of? **Y** ☐   **N** ☐ (If yes please specify)

Does your child have any learning difficulties that may need special attention? **Y** ☐ **N** ☐ (If yes please specify)

☐   I am aware that, by enrolling in these classes at Dance Factory, my child will participate in the exams, performances & dress rehearsals:

Parent Signature:	Print Name:

I will be paying by:
☐   term (only option for 3-13 years classes and 14 & over performance classes)

☐   1 month dance card - 10 classes   ☐   3 month dance card - 10 classes

☐   1 month dance card - 5 classes   ☐   casual (pay as you go)

Payment can be made by eftpos/credit card facilities, credit card by phone or bank transfer:
BSB 063 166 ACC NO. 1002 4887(please enter your name in description field).
If you would like us to debit your credit card, please fill in your details below and return to Dance Factory.

Type of card: _____   Card number: _____
Name on card: _____
Signature: _____   Exp date: _____   Verification No: _____

Amount to be debited: $ _____

PLEASE RETURN FORM VIA EMAIL TO: dancefac@netspace.net.au

OFFICE USE ONLY: Date payment made: _____

Date confirmation sent: _____

Payment made by: **Eft** ❏   **Bank Transfer** ❏   **Cash** ❏