



# DANCE FACTORY



## 2012 VCE Dance & VCE VET Dance Enrolment Form

<b>GENERAL</b>									
Surname					First Name				
Address									
Suburb					State			Postcode	
Telephone		Home			Mobile				
Email									
Date of Birth			Age as of 01/01/12			Sex (please circle) M / F			
How did you hear about Dance Factory? (please specify)									
Please tick your year level for 2012 & the course you are enrolling for			YR 10		YR 11		YR 12		
VCE Unit 1 & 2		VCE Unit 3 & 4		VCE VET Dance Wednesday Units 1 & 2			VCE VET Dance Saturday Units 1 & 2		
<b>PERSON RESPONSIBLE FOR FEES</b>									
Surname					First Name				
Address									
Suburb					State			Postcode	
Telephone		Home			Mobile			Work	
Email									
<b>SCHOOL INFORMATION</b>									
School				Contact Person					
Address									
Suburb					State			Postcode	
Telephone					Fax				
Student ID No.				Email					
<b>OFFICE USE ONLY</b>									
Acceptance Letter to Student		Fees Paid		Acceptance Form Signed		Conf Email to School		VACC Confirm Rec'd	

## DANCE TRAINING

Style of Dance	Years of Training	Hours per Week	School's Name	Teachers
Jazz				
Classical				
Funk				
Tap				
Other				

## STUDENTS MEDICAL HISTORY

Have you ever suffered from any of the following conditions? Please Tick

Allergies

Arthritis

Asthma

Hepatitis

Glandular  
Fever

Diabetes

Epilepsy

Heart Disease

Have you ever injured or suffered pain in any of the following areas? Please Tick

Ankles/Feet

Knee

Hamstring

Groin

Hip

Back

Neck

Shoulder

Have you ever been hospitalised?

Are you currently taking medication?

If you have ticked any of the above please give details

Parent/Guardian's Signature: