



DANCE FACTORY



DANCEFACTORY

JUNIOR & TEENAGE

DANCEFACTORY

Enrolment Form 2010

PLEASE PRINT CLEARLY AND COMPLETE ALL SECTIONS

STUDENT DETAILS			
First Name		Surname	
Address			
Suburb		State	Postcode
Telephone	Home	Mobile	
Email			
Date of Birth	Age as of 01/01/2010		Sex (please circle) M / F
How did you hear about Dance Factory? (please circle) Internet Word of Mouth Other? (please specify)			
PERSON RESPONSIBLE FOR FEES			
First Name		Surname	
Address			
Suburb		State	Postcode
Telephone	Home	Mobile	Work
Email			
Relationship to student?			
Emergency Contacts			
NAME	RELATIONSHIP	PHONE 1	PHONE 2
1			
2			
3			

DANCE TRAINING			
Have you had any previous training? (Please circle) Y / N (If yes, please list below)			
Style of Dance	Years of Training	Classes per week	School's Name or Teacher
Jazz			
Classical			
Funk			
Tap			

PLEASE LIST CLASSES YOU WOULD LIKE TO ENROL FOR:		
Class/Standard	Time	Teacher

Are there any Medical Conditions we should be aware of? (Please circle) YES / NO

Does your child have any learning difficulties that may need special attention? (Please circle) YES / NO

Fees can be paid by cash, cheque, EFTPOS or credit. If you would prefer us to debit your credit card, please provide details below.

Type of Card: _____ Name on Card: _____

Card Number: _____ Signature: _____

Expiry Date: _____ Verification Number: _____ Amount to be debited: _____

Please Return to:
Dance Factory
PO BOX 4119, Richmond East Vic 3121
4-10 Yorkshire St, Richmond Vic 3121
Ph: 03) 94299492 Fax: 03) 94298806
E-mail: dancefac@netspace.net.au