

# DANCE FACTORY

## 2011 Summer School Enrolment Form

First Name				Last Name			
Address			Suburb		State		Post Code
Email Address (please print clearly)				Home Phone		Mobile	
Date or Birth (if under 18)				Age as of 01/01/11		Male	Female
Emergency Contact				Phone 1		Phone 2	
How did you hear about Dance Factory? (Please specify)							
Please tick one							
Full Summer School			Single classes				
PLEASE TICK YOUR STANDARD FOR EACH STYLE							
Style of Dance	Advanced	Intermediate	Beginner	Style of Dance	Advanced	Intermediate	Beginner
Jazz				Musical Theatre			
Classical				Funk			
Contemporary				Hip Hop			
Tap				Acrobatics			
Give a brief description of your training i.e. where, how long.							



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**Dance Factory**  
 4-10 Yorkshire St, Richmond Vic 3121  
 P.O Box 4119, Richmond East Vic 3121  
 Ph: (03) 9429 9492 Fax: (03) 9429 8806



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<b>CLASSES- If not attending Full Summer School, please list below classes you will be attending.</b>			
<b>DAY/TIME</b>	<b>STYLE</b>	<b>STANDARD</b>	<b>PRICE</b>
<b>1</b>			
<b>2</b>			
<b>3</b>			
<b>4</b>			
<b>5</b>			
<b>6</b>			
<b>7</b>			
<b>8</b>			
<b>9</b>			
<b>10</b>			
<b>11</b>			
<b>12</b>			
<b>13</b>			
<b>14</b>			
<b>15</b>			
			<b>TOTAL:</b>

Payment can be made by cash, cheque, money order, eftpos/credit card facilities, credit card by phone or direct debit:

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: \_\_\_\_\_ Name on Card: \_\_\_\_\_

Card Number: \_\_\_\_\_ Expiry Date: \_\_\_\_\_ Verification No: \_\_\_\_\_

Signature: \_\_\_\_\_ Amount to be debited: \_\_\_\_\_

<b>PAYMENT</b>	Enclosed is full payment of \$	<b>Office Use Only</b>	Confirmation Sent	
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