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Charles Academy of Dance - Registration Form:

- Full name of student:.....
- Age of student:.....
- Date of Birth:.....
- Address:
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- Postcode:.....
- Telephone:
- Mobile:.....
- Email:.....
- Any siblings at the school (this will help us work out your discount)?.....
- Name of Parent/Legal Guardian:.....
- Emergency Contact (Name & Telephone):.....
- Doctors Name:.....
- Are there any medical conditions/injuries/illnesses that we should be aware of?
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- Is there anything else that we should be aware of prior to commencing teaching (medication, inhalers etc)?
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- Which classes are you interested in?

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(If you are interested in the student programme, please make us aware)

- Do you have any previous dance experience? (Please list any exams taken, previous teacher, grades, societies, old pin numbers etc)

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Child Protection: *I confirm that I have read the Child Protection Policy and will abide by my responsibilities as a parent/guardian. I understand that on occasions, it may be necessary for teachers to correct dance movements by physically moving the pupil into the correct alignment, to assist with effective teaching. I understand that on occasions, photos and videos of pupils may be taken and used for Charles Academy of Dance publicity purposes, and that it is my responsibility to make the Principal aware if this is not allowed.*

I confirm that I will pay all fees in advance of the term commencing, and that half a term's notice in writing must be provided if the pupil is to leave a class.

Parent Signature.....

Date.....

Pupil Declaration: *I understand that at Charles Academy of Dance, I am to treat teachers and all other pupils with respect, take care of all property and equipment and to arrive to class neatly dressed in correct uniform and promptly. I understand that the school encourages all pupils to be supportive and friendly to one another and focuses on hard work and commitment. Pupils are to behave appropriately at all times whether in class or within the waiting area, toilets etc. I understand that regular attendance is important and that it is my responsibility to phone in should I be unable to attend class.*

Pupils Signature.....

Date.....

Many thanks for your time & support, we look forward to welcoming you to our school.



Charles Academy of Dance
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