



# Students Enrolment Form 2012

To enrol please return this form and send it along with a \$30 booking fee (please note : the booking fee is a once off fee separate to term fees) to: Crazy Feet Dance Studio: PO Box 1145, Hartwell 3124

Students Full Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

Suburb: \_\_\_\_\_ Postcode: \_\_\_\_\_

Parents Names: \_\_\_\_\_

Contact Numbers: Home (03) \_\_\_\_\_

Mothers Work: \_\_\_\_\_ Mothers Mobile \_\_\_\_\_

Fathers Work: \_\_\_\_\_ Fathers Mobile \_\_\_\_\_

Family Email: (PLEASE PRINT CLEARLY) \_\_\_\_\_

Students Birth Date \_\_\_ / \_\_\_ / \_\_\_\_\_ Year level at School in 2012 \_\_\_\_\_

*Please write the classes you wish to enrol in.*

Students Name	Class Name	Class Day	Class Time
Class 1	_____	_____	_____
Class 2	_____	_____	_____
Class 3	_____	_____	_____
Class 4	_____	_____	_____
Class 5	_____	_____	_____
Class 6	_____	_____	_____
Class 7	_____	_____	_____
Class 8	_____	_____	_____
Class 9	_____	_____	_____
Class 10	_____	_____	_____
Class 11	_____	_____	_____
Class 12	_____	_____	_____

I \_\_\_\_\_ as the parent/guardian of \_\_\_\_\_ hereby agree to all the terms and conditions as set by Crazy Feet Dance studio in their 2012 brochure and understand that my child dances at their own risk and no liability will be taken under any circumstances by the proprietors, teachers, or Crazy Feet Dance Studio for physical injury or loss/damage of property or personal effects or clothing. **I understand that this enrolment is for the entire year of 2012 and that I am required to give 5 weeks notice in writing when my child stops attending class or term fees will be charged.** I also give permission for my child to be photographed by Crazy Feet Dance Studio and to be included in the 2012 concert video.

Parents Signature ..... Date \_\_\_ / \_\_\_ / \_\_\_