

ENROLMENT FORM

WHICH MODE SCHOOL:

(Please circle)

WHICH CLASS:

Pontardawe
Brynmill
Penyrheol
Llanelli

Mini
Junior
Pre Intermediate
Intermediate
Senior

FORENAME(S):..... SURNAME:.....

ADDRESS:.....

..... POSTCODE:.....

D.O.B:..... AGE:..... TEL:.....

E-MAIL:.....

BILLING CONTACT (PARENT/GUARDIANS) NAME:.....

EMERGENCY CONTACT NAME:..... TEL:.....

(Must not be your own number and please inform the above person that in emergencies they may be contacted)

Does your child suffer from any ailments, which might need medication, e.g., allergies, asthma, conditions etc?

.....

.....

I agree for.....(name) to attend a trial class with Makers of Dance Energy after which I may decide to continue with the remainder of the term. I have read and understood the terms and conditions.

Signed:..... Date:.....

Please return or bring to class:

Makers of Dance energy Ltd

24 Pontarddulais Road

Gorseinon

Swansea

SA4 4FE

Tel: 01792 899562

Would you like to be informed of the following (please tick)

Funk it – Holiday Programme

Master Class Workshops

Shows

How did you hear about us? (please circle)

A friend / yellow pages / newspaper / leaflet or poster / website / other (please state)

OFFICE USE ONLY

Status

Start Date.....

Category.....

ID.....

Entered date.....