

FULL STUDENT NAME (list all family members enrolling for 2019)	DATE OF BIRTH	SCHOOL GRADE (in 2019):
#1:		
#2:		
#3:		
#4:		
POSTAL ADDRESS:		
MAIN EMAIL ADDRESS: (invoices & info)		
ADDITIONAL EMAIL ADDRESSES (student emails for seniors etc):		
MAIN CONTACT	NAME:	RELATIONSHIP TO STUDENT:
	Home / Work No:	Mobile No:
ALTERNATE CONTACT	NAME:	RELATIONSHIP TO STUDENT:
	Home / Work No:	Mobile No:
Does your child have any medical conditions or anything else we need to know specifically?		

Conditions of enrolment:

- I understand that while the upmost of care is taken, participation in dance classes carries a risk of physical injury. Each student participates at their own risk and teachers/staff of FNQ Dance Academy are not liable for any injuries sustained during classes
- I appreciate that dance is a tactile art form, and students/teachers will have physical contact in class
- I give permission to use photographs/videos of the above student for publicity & memorabilia purposes
- I will ensure my child understands the Academy Code of Conduct and School Rules and will help to enforce them

PARENT SIGNATURE: _____ (OR TYPE 'I AGREE') DATE: _____

PLEASE LIST THE CLASSES YOU WISH TO ENROL IN FOR 2019

STUDENT #1 NAME:

PACKAGE: YES / NO

CLASSES	DAY / LOCATION	CLASSES	DAY / LOCATION
1.		6.	
2.		7.	
3.		8.	
4.		9.	
5.		Extras:	

(additional children overpage)

ADMIN:

DATABASE:

STUDENT #2 NAME:

PACKAGE: YES / NO

CLASSES	DAY / LOCATION	CLASSES	DAY / LOCATION
1.		6.	
2.		7.	
3.		8.	
4.		9.	
5.		Extras:	

(additional children overpage)

ADMIN:

DATABASE:

STUDENT #3 NAME:

PACKAGE: YES / NO

CLASSES	DAY / LOCATION	CLASSES	DAY / LOCATION
1.		6.	
2.		7.	
3.		8.	
4.		9.	
5.		Extras:	

(additional children overpage)

ADMIN:

DATABASE:

STUDENT #4 NAME:

PACKAGE: YES / NO

CLASSES	DAY / LOCATION	CLASSES	DAY / LOCATION
1.		6.	
2.		7.	
3.		8.	
4.		9.	
5.		Extras:	

(additional children overpage)

ADMIN:

DATABASE: