



STREET DANCE CLASSES

☺ EVERY THURSDAY ☺

Year 3 - Year 4 - Year 5 - Year 6

9th January - 2nd April 2020

12 Weeks £69.00

3.15-4.15pm

AT LALEHAM PRIMARY SCHOOL IN THEIR KS1 HALL

Fees Payable By:

- Cash

- Bacs: Santander Bank. Account Number:
40978122, Sort Code: 09-06-66, Reference: Your
Child's Name

CHILD'S NAME:.....

NAME OF PARENT/GUARDIAN:.....

MOBILE NUMBER:.....

EMERGENCY NAME & TELEPHONE:.....

CHILD'S D.O.B & AGE:.....

EMAIL ADDRESS:.....

MEDICAL/PHYSICAL CONDITIONS (IF ANY):

As far as I am aware my child is medically fit to take part in this activity. I understand that payment is non-refundable, or deductible due to non attendance or sickness. I HAVE READ AND UNDERSTOOD THE TERMS AND CONDITIONS.

Signed..... Dated:.....



Principal Holly Machedze A.I.S.T.D. L.I.S.T.D

Disclaimer Form For Students Attending Holly’s School of Dance Street Dance & Break Dance Classes.

In signing this form I confirm I have read and understood these terms and conditions, as well as Holly’s School of Dances Privacy Policy found on the Holly’s School of Dance website.

Fees are non-refundable or deductible due to sickness or non-attendance. If a class is cancelled I understand that Holly’s School of Dance will do all they can to reschedule the class, if this cannot be done then fees will be carried over to the following half term/term payment. I understand that fees must be paid within the first 2 weeks of each new ½ term or term, or at the beginning of each class if payable weekly.

It is my responsibility as Parent(s)/Guardian(s) to let the teachers of Holly’s School of Dance know of any existing medical conditions/injuries my child/children have or any medical conditions/injuries that may occur as soon as they arise.

I understand that these classes are not a risk free activity. Holly’s School of Dance always recommend parents seek professional medical advise before allowing their child/children to take part. I understand that none of Holly’s School of Dance teachers and helpers can be held responsible for any injuries or ill health of any kind arising from participation within these classes.

I understand that it is my responsibility as parent(s)/guardian(s) to drop off and collect my child/children on time.

I understand that any lost property is not the responsibility of Holly’s School of Dance.

I allow my child/children to be physically assisted through a movement or series of movements by the teachers/helpers of Holly’s School of Dance.

I understand that it is my responsibility as parent(s)/guardian(s) to inform teachers/helpers from Holly’s school of Dance if any of my contact details change.

I understand that it is my responsibility as parent(s)/guardian(s) to inform Holly’s School of Dance, by way of email, if I do not wish for any images/video clips of my child/children to be taken/to appear on any visual/social media, including Facebook and the Holly’s School of Dance Website.

I consent to Holly’s School of Dance contacting me via the contact details I have provided on the registration form I completed and confirm that I accept these details I provided on the registration form will be kept for as long as my child/children continue to take part in Holly’s School of Dance classes/workshops.

Signed Parent(s)/Guardian(s):.....

Date:.....

Child’s Name:.....