

VCM

Academy of Dance

BALLET • JAZZ • HIP HOP • CONTEMPORARY

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ENROLMENT FORM

Please fill out this form and return to the studio, post or email to address above.

Student's Name:

Age: Date of Birth:

Home Address:

Home Phone:

Student's Mobile: *(senior only)*

Mum's First Name:

Mum's Mobile:

Dad's First Name:

Dad's Mobile:

Medical Conditions:

Previous experience:

Classes requested: *(please circle)*

JAZZ

BALLET

HIP HOP

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