



Enrolment Form

Please complete a separate form for each child

Childs Name:

Parents Name:

Address:

(Please include postcode)

Contact No:

Mobile:

Email:

DOB:

School Attended:

Which branch will you are attending: Coventry

Northampton

Delete as appropriate

Which classes will you be attending?

Please ask Miss. Krystle if unsure

Number of family members at school?

Any medical conditions?

Did a current student of the school recommend us, if so please give their name?

Term Dates:

Winter Term: 15 weeks 1st September – 20th December

Half Term week: 26th October-1st November

Spring Term: 12 weeks: 4th January- 4th April

Half Term Week: 15th February-21st February

Summer Term: 13 weeks: 19th April- 25th July

Half Term Week: 24th May-31st May

I give consent for my child to attend classes at the Krystle Jayne's Dance Academy and enclose the registration fee of £10.00, cash or cheque (cheques to be made payable to Krystle Jayne's Dance Academy). I give permission for my child to receive first aid, hospital treatment in any case of emergency. I understand all fees are payable in advance and **6 weeks notice must be given should I wish my child to leave the academy or payment in lieu.**

Signed:

Name:

Date: