



Deanna School of Dancing

APPLICATION FOR ADMISSION TO BE FILLED IN BLOCK LETTERS AND SIGNED BY A PARENT

OFFICE USE ONLY	
ADM	
DB	
CLASS LISTS	
TEACHER	
REGISTER	
FILE	

STUDENTS INFORMATION :

Last Name : _____ First Name : _____
 Date of Birth : Day Month Year
 Date of Admission : _____ Grade : _____

PARENTS / GUARDIAN'S INFORMATION :

Name of Mother/Guardian : _____ Mobile No.
 Employment Details : _____ Occupation : _____
 E-mail Address :

Name of Father/Guardian : _____ Mobile No.
 Employment Details : _____ Occupation : _____
 E-mail Address :

CURRENT RESIDENCE INFORMATION :

Address : _____
 Home Tel. No. :

MEDICAL INFORMATION :

Please list any medical or imperative information that we should know about your child:
 Please specify if your child previously or presently has psychological / Physical injuries/
 Medical requirements or conditions, that we should be aware of, Yes No

If yes, give further details:

ENROLMENT POLICY

Disclaimer

There is non-refundable enrolment fee for all students. Term fees have to be paid at the commencement of each term and no student is exempt from this.

Deanna School of Dancing takes all reasonable care when conducting its classes and provides a safe learning environment for dance teaching practice. Deanna School of Dancing, Deanna Jayasuriya (Founder), Natasha Jayasuriya-RTS RAD(UK),BA Hons (Principal) and the dancing school staff are **NOT LIABLE** for any injuries, loss of, or damage to personal property that your child may incur. Deanna School of Dancing instructors are trained and authorised to impart dance techniques and physical instruction. However, please note that dance is a strenuous activity where unforeseen and collateral injuries could result.

If your child is absent for a period amounting to or exceeding a term, please try to provide adequate notice so that we can make the necessary arrangements, if prior notice (within reason) is not provided which results in an unfilled vacancy for that term, that terms fee will have to be paid.

Please inform the instructor of any physical limitations your child may have. If you are in doubt of your child's physical abilities, please consult your physician beforehand.

Please note that RAD Examinations are not compulsory..

Signing this document implies that informed consent is provided and that you agree with all of the above.

Kindly complete, sign and submit this form.

Student's Name

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Signature of Parent

.....
Date