



Registration Form

Name of Child

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Date of Birth .....

Name of Parent

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Address

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Telephone..... Mobile.....

Email.....

Any Medical Conditions

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I give permission for the above named child to have photos taken in class to be used on the Aspire Dance Academy website/Facebook page to promote classes/workshops/presentation days/shows. Photos **will not** include child's/ children's name, age, address or any personal details without parental approval. For full photo policy visit [www.aspiredance.co.uk](http://www.aspiredance.co.uk)

**YES/NO**

**Print Name**

**Signature**