**Booking Form**

**(please return to** [**kate@danceteachersinc.co.uk)**](mailto:kate@danceteachersinc.co.uk))

*To secure your place, please remit the course fee by BACS to NatWest A/C 31495591 Sort Code 60-06-20*

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| Course Name | | | | **Hip Hop, Afrohouse and Contemporary Workshop Day** | | | | | | | | | | | | | | | |
| Course Date | | | | **June 11th 2017** | | | | | | | | | | | | | | | |
| Course Time | | | | **11.30am – 5.00pm** | | | | | | | | | | | | | | | |
| Course Venue | | | | **Lingfield Community Centre**  **Old School Place**  **Lingfield**  **Surrey**  **RH7 6AB** | | | | | | | | | | | | | | | |
| Course Fee | | | | **£45.00** | | | | | | | | | | | | | | | |
| Name | | | |  | | | | | | | | | | | | | | | |
| Contact No. | | | |  | | | | | | | | | | | | | | | |
| Emergency Contact Name | | | |  | | | | | | | | | | | | | | | |
| Emergency Contact No. | | | |  | | | | | | | | | | | | | | | |
| Email Address | | | |  | |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| Do you have any illness, allergy or injury of which we need to be aware? | | | | | | | | | | | | | | | | | | | |
| YES |  | NO |  | | *(Please \* as appropriate)* | | | | | | | | | | | | | | |
| If yes, please give details below. | | | | | | | | | | | | | | | | | | | |
| Are you any medication of which we need to be aware? | | | | | | | | | | | | | | | | | | | |
| YES |  | NO | |  | | *(Please \* as appropriate)* | | | | | | | | | | | | | |
| If yes, please give details below. | | | | | | | | | | | | | | | | | | | |
| **TERMS and CONDITIONS**   * DanceTeachersInc cannot accept responsibility for property or valuables brought onto the premises. * It is the student’s responsibility to prepare for and warm up properly before classes commence. * In the event that DanceTeachersInc cancels a course, students will be fully reimbursed | | | | | | | | | | | | | | | | | | | |