

Blue Sky Youth Dance Company Application form

Name	Date of Birth:
Home Address:	Home Telephone Number: Mobile Number: Email Address:
School:	Previous dance and/or performing experience (if any) - either in or out of school

Emergency contact details:

Name: _____

Home telephone number: _____

Mobile telephone number: _____

Arrangements for the end of the workshop:

Please give details of how you will be returning home (e.g. parent/carer collecting, using public transport)

If invited to join Blue Sky Dance Company we understand that the above named person should attend all Tuesday class and rehearsal sessions (with exceptions for genuine emergencies) and will need to be available for additional rehearsal and performance dates (tba) during the year.

Signed:

dancer _____ parent _____