

NATIONAL THEATRE BALLET SCHOOL

VCE DANCE / VET DANCE ENROLMENT FORM 2018

STUDENT DETAILS

SURNAME: _____ Given Names: _____ D.O.B: / / Age: ___ M/F

PARENT & BILLING DETAILS

SURNAME: _____ Given Names: _____

Address: _____

Suburb: _____ State: _____ Postcode: _____

PostalAddress: _____

Suburb: _____ State: _____ Postcode: _____

Telephone - Business: _____ Home: _____ Other: _____

Email: _____

FEES INFORMATION

***All Fees MUST be paid by the first week of Each Term**

*** Class/es Attending (Please complete overleaf)**

Students under 18 years of age must obtain the signature of a parent or guardian
I, the undersigned _____ parent/guardian of the above mentioned
student, agree that he/she shall enter the National Theatre Ballet School, and I undertake to reimburse the school
for any monies due from him/her in the event of default.

SIGNED: _____ DATE: _____

INDEMNITY PROVISION

I/We agree

That the school accepts no responsibility or liability whatsoever to any injury sustained by students in the normal
course of instruction and this will
include from time to time taking part in dance performances with the National Theatre Ballet School at the National
Theatre and other venues.

To authorize the school to obtain emergency treatment for any injuries sustained by students, howsoever caused,
whenever the school at it's discretion
sees fit

3. To indemnify the school any costs incurred in obtaining such emergency medical treatment for injuries sustained
by the students.

Authorise the school to use any footage or photo taken during the students enrolment or thereafter at the National
Theatre Ballet School in any marketing
or advertising material.

SIGNED: _____ SIGNED: _____ DATE: _____

Parent/Guardian

Applicant

**The National Theatre observes the provisions of the Commonwealth Privacy Act 1988
(amended 2001). For further information visit www.privacy.gov.au.**

If you are still attending an Educational Institution please complete the section below.

School Attending: _____

School Phone No: _____ Home School VASS No. (Units 3 & 4 Only) _____

VCE / VASS Coordinator: _____

Are you doing any VCE subjects through Distant Education? (Please circle) YES / NO

Is this an extra subject? (Please circle) YES / NO

Do you attend classes at the National Theatre Ballet School? (Please circle) YES / NO

If not, which Ballet School do you attend: _____

Name of Teacher: _____ Phone No: _____

Please nominate your strongest dance styles in order of preference and level achieved:

_____ Classical Level Achieved: _____

_____ Modern (Contemporary) Level Achieved: _____

_____ Jazz Level Achieved: _____

_____ Tap Level Achieved: _____

Which subject are you interested in? (Please circle) VCE Dance VET Dance

Which units are you interested in? (Please circle) VCE Dance 1 2 3 4 VET Dance 1 2 3 4

Have you completed any units of VCE Dance or VET Dance already? YES / NO

If so, which ones: (Please circle) VCE Dance VET Dance
VCE Dance 1 2 3 4 VET Dance 1 2 3 4

Please state the style: _____

Which practical class will you be attending associated with VCE Dance/VET Dance?

Any other comments:
