The Starlets Performing Arts School **REGISTRATION FORM 2020**

Name
Date of Birth
Address
Contact Telephone Numbers
Email Address- (This will be used as a point of contact)
Doctors Information
Any allergies including food
Any relevant medical information
In the case of an emergency please contact
1.) NameNumber
relationship to child
2.) NameNumber
relationship to child
Privacy, GDPR, COVID-19 policies and Code of Conduct acknowledgment consent
I give permission for any photographs or video to be taken of my child while attending the school. I also agree that these photographs and video can be used in any way with reference to the Starlets both publicised and online including social media. I understand that a hands on approach and physical contact may be used in class to create certain lifts and help with technique. I understand that the Starlets take no responsibility for accidents/ Injuries that occur during training / performances. All classes and performances are taken at own risk. I understand that after a given 4 weeks of missed classes has expired classes have to be paid in full, and should my child wish to no longer tak a class or to be apart of The starlets that a period of 4 weeks paid notice must be given to Mrs Kerry Daisley.
Due to Covid 19 Pandemic that forced the School to Close- Absence allowance is reduced to 2 weeks that can be taken anytime from when the school recommences on 10th August 2020 and will be renewed 1st July 2021 where it wi go back to the 'normal' 4 weeks
I confirm that I have read, understood and accept the policies shown on our website (<u>www.thestarlets.co.uk</u>).
I understand that it is my responsibility to familiarise myself with these polices regularly. I also agree to the Starlets School of Performing Arts contacting me via the email address supplied with informational emails only.
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Signed
PrintDateDate