

Relevé Dance

Teaching dancers to rise above



Dancers Name: _____

Date of Birth: DD/MM/YYYY ___/___/_____

Parent/Caregiver *(If applicable)*: _____

Email Address: _____

Contact Number: _____

Emergency Contact Name: _____

Emergency Contact Number: _____

Address: _____

Relevant Medical Conditions and Precautions *e.g. Asthma - Carries inhaler*

Best Time to Contact *(Tick Best Option)*

Best way to Contact *(Tick Best Option)*

Daytime

Phone

Evening

Email

Anytime

I have read and agree to Relevé Dances Privacy Statement and Terms and Conditions.

I agree to receive regular newsletters from Relevé dance at the email provided.

I give permission for photos and videos of me/my child to be posted online/social media.

Signature: _____

Email: info@relevedance.co.nz
Website: www.relevedance.co.nz
Phone: 021 104 2251

Address: 124 - 126 Sturges Road
Western Heights Primary
Henderson
Auckland 0612

