

Rogerson Summer Dance Camp 2017

A great start to the dancing year.

Permission to Attend

No bookings will be accepted without completing this form

I give permission for my child _____ to attend the Summer Dance Camp at Mount Keira Scout Camp from Sunday 8^h January to Friday 13^h January 2017.

I give my child permission to be involved in the activities being arranged at the camp including dancing classes and swimming.

I give permission for appropriate photography and videography of my child to be used in advertising material.

Rogerson Summer Dance Camp **DOES NOT** accept responsibility for the care and protection of such valuable and attractive personal items such as phones, iPods, iPads/tablets or cameras. It is considered **INADVISABLE** to take valuables to camp, if your child does so the responsibility of the item/s rests with the child.

I understand the cancellation policy set out below.

Signed: _____ Please print name: _____ Date _____

(a) Packages and Method of Payment

(please tick appropriate boxes)

- | | |
|--|--|
| <input type="checkbox"/> Camp only (\$435), or | <input type="checkbox"/> Camp package including t-shirt and highlights DVD (\$470). |
| <input type="checkbox"/> Full payment, or | <input type="checkbox"/> Deposit of \$135 (or \$170 for package), balance to be paid by instalments or by 27 th November. |

If the package is being ordered please circle t-shirt size:

CH 6 CH 8 CH 10 CH12 CH 14 Adult Small Adult Med Adult Large

Please indicate your child's actual clothing size and we will adjust it depending on the fit of the samples.

CANCELLATION: The deposit you pay is to hold your place at the camp and is non-refundable. After the pay in full date (27th November) refunds will not be issued except in extenuating circumstances that will be assessed on an individual basis.

Postal Bookings: PO Box 759, Jindabyne NSW 2627

Cheques made payable to Rogerson Ballet Academy

Direct deposit is also available please contact us if you require details.

(b) Private Lessons

(please tick appropriate box)

Private lessons are \$35 per half hour and are available for technical teaching, grade work and eisteddfod work.

I would like my child to have private lessons during camp: ☐

I would not like my child to have private lessons during camp: ☐

(c) Medical Information/Dietary Requirements

Please list below any details that you think we should be aware of during the camp, including required regular medication or any other medical conditions or dietary requirements.

(d) Standard of Student Please tick the discipline your child undertakes on a regular basis and include their level (e.g. Grade 4, Intermediate Foundation, Level 8, Senior etc.)

☐ Ballet – Grade/Level _____

☐ Jazz – Grade/Level _____

☐ Tap– Grade/Level _____

☐ Modern/Lyrical– Grade/Level _____

☐ Hip Hop – Grade/Level_____

☐ National Character – Grade/Level_____

Any Additional Information (feel free to be as specific as you wish) _____

(e) Medicare Details

Whilst children attending the dance camp conducted by the owner's & staff of Rogerson Dance Camp will be supervised & all reasonable & proper care will be taken to ensure their safety, Rogerson Dance Camp shall not be responsible for any injury, accident or misadventure which may occur whilst the children are at dance camp.

Medicare number _____

Signed _____

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(f) Contact

If it is necessary to contact me while my child is at the camp, I can be contacted on:

Contact name: _____ Phone: _____ or _____

If I cannot be reached, please contact : _____ Phone: _____

(g) Requirements

Details of what the children will need to bring to the camp will be provided later. Please return this completed form when making your child's booking. For further enquiries, please contact Barbara on 0415 939 443 or Lisa on 0409 221 684.

Student's name: _____ Student's Date of Birth: _____

Address: _____

Email: _____

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