Encore Entertainment Service P/Ltd C/- 312 Exchange Tower, 530 Little Collins Street, Melbourne Vic., 3000 EMAIL: juliet@elementalegyptiandance.com.au Mobile: 0418 500 729

ENROLMENT FORM

| Please print out, fill in and return the signed form to the above add alternatively email juliet@elementalegyptiandance.com.au for a pr | |
|--|---|
| Name: | |
| Phone: | |
| Email: | |
| What I hope to gain from this course is: (i.e. general fitness, dance training, flexibility, strength, improved po | osture, etc.) |
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| My past exercise or dance experience has been: (i.e. pilates, yoga, gym, jazz, classical ballet, Indian, Bollywood, Belleither exercise or past dance experience is <i>not</i> a prerequisite of atternated in any exercise for 12 months or more please also state the | endance, however, if you have not |
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| All students are required to read and sign the following b | pefore commencing the course. |
| Whilst all care is taken during classes to ensure safe dance proceed at a level that is comfortable to them, Elemental Egypt Juliet Le Page cannot be held responsible for any injuries that r dance form. If you have a pre-existing medical condition which doctor's certificate should be obtained. | ian Dance is a form of exercise and may occur during the practice of this ch may affect your participation, a |
| have read and understand these conditions of enrolment. Sign & Date: | |
| Sign & Date: | |