

## **ENROLMENT FORM**

Parent NAME:	
MOBILE:	
ADDRESS:	
EMAIL:	
STUDENT NAME:	
D.O.B:	
Allergies/Medical Conditions:	

Photographs or recordings may be used in class activities and/or published by the JAZZ IT UP DANCE in documents, school newsletters, displays, on the website or social media platforms (e.g. Facebook, Instagram, YouTube) of the School and marketing materials produced by or for the Dance School. Unless otherwise directed by you, your child's name may be included with/in the photograph/video.

We seek your consent before including your child in any such publication or internal/external display.



## **I GIVE PERMISSION FOR:**

Photographs/videos in which my child may be involved, to be published in/on any Jazz It Up Dance marketing platforms .ie; instagram, facebook.

SIGNATURE:\_\_\_\_\_ DATE: \_\_\_\_\_