

Student Enrolment Form

I would like to enre	ol	Date of Birth:	
		Date of Birth:	_
For the following:			
	Тар	Day	
	Modern/Jazz	Day	_
	Contemporary	Day	_
I enclose £10 dep	osit (non-refundable) made	payable to Salisbury Dance Studios.	
Name of Parent/G	Guardian		
Address			
			_
		Post Code	_
Telephone (Day) _		(Evening)	
Mobile			
		e aware of e.g. asthma, diabetes, epilepsy, joint pa	in,
I understand that faculty.	due to the nature of dance,	physical contact may be necessary by the teaching	
I agree to pay terr from a class or cla		erm's notice or fees in lieu if my child/children withdr	aw
I give/ do not give Studios.	permission to be used in a	ny publicity or promotion related to Salisbury Dance	;
Signed		Date	

Tidworth Leisure Centre, Nadder Road, South Tidworth, Wiltshire, SP9 7QN.
Tel: Miss Paige - 07938890402 / Miss Kim - 01722341229 / Miss Katy - 01722329007

Email: admin@salisburydancestudios.co.uk Website: www.salisburydancestudios.co.uk



New GDPR regulations from 25 May 2018 requires us to inform you of the following:

Tidworth

- We (Salisbury Dance Studios) are holding your personal data information i.e. student's names, date of birth, address, contact numbers, email address, parents/guardians names. Also medical information, registration numbers with relevant examination bodies and exam results.
- 2. We have this data so that we can contact you to inform you of anything relevant to you or your child attending classes at Salisbury Dance Studios or if you or your child should be taken ill during a class and therefore this data may also be shared with our staff.
- The data is only shared with the following organisations: The Royal Academy of Dance (RAD) and Imperial Society of Teachers of Dancing (ISTD) for the purposes of entering pupils for examinations.
- 4. The information is kept until either you or the student leaves the school and it will then be archived.
- 5. The data is securely held and if our data is breached you will be informed within 72 hours.
- 6. If you need to access the data held please speak directly to Miss Paige, Miss Kim or Miss Katy and we will be happy to provide this for you.

It is very important that you are happy for Salisbury Dance Studios to hold your data as otherwise we are unable to deliver classes for adults and students or to enter students for examinations.

Student's name:		
Parent / Guardian (under 18)		
I consent to being contacted by email and receiving i	nformation relevant to SDS:	
I DO NOT wish to be contacted by email from SDS:		
Signed:	Date [.]	