



Registration Form

Ballyhoo Dance and Theatre School

Confidentiality: Details on this form will be held securely and will only be shared with other members of Ballyhoo staff or others who need this information to meet the specific needs of your child

Personal information: Child/young person

Full Name *

Preferred name if have one

Your Address *

Date of Birth *

Gender *

Male

Female

Are there any activities in which your child can NOT participate? *

No

Yes

If yes, give details:

Does your child have an ISTD PIN number? If yes, please enter

Personal information: Parent/carer

Name *

Contact number(s) *

Email *

Emergency contact information:

Name of alternative adult to contact in an emergency: *

Relationship to child/young person: *

Number of alternative adult: *

Medical information:

Are there any specific medical conditions requiring medical treatment? *

No

Yes

If yes, give details:

Details of medication required:

Are there any other medical conditions or disabilities to be aware of? *

No

Yes

If yes, give details:

Do they have allergies? *

No

Yes

If yes, give details:

Confirmation *

I confirm the registration of the child above

Print Name *

Date *



Month Day Year

Declaration of consent - parent/carer

Please tick boxes below and then sign this form

*

I give consent that if an emergency medical situation arises Ballyhoo staff act in loco parentis for administration of first aid and/or other medical treatment that in the opinion of a qualified medical practitioner may be necessary. I also understand that in such circumstances all reasonable steps will be taken

With your permission any photos or video will be stored on a computer or other external devices that Ballyhoo use . You have the right to change your previous consent to photos/ videos being taken, stored or used. Please inform Julie/Heidi/ Jane as they will be deleted as appropriate. *

I give consent for photos/videos to be taken and used for advertising purposes on Ballyhoo Website, and social media. Only first names will be used.

I do not give permission for photos or videos of my child to be used

*

I confirm that I have read and understood the Terms and Conditions and code of conduct (Available on the website: see footer below)

Are you happy to receive emails and communication keeping you up to date with Ballyhoo news, classes and courses that may be of interest to you ? *

Yes

No

Date *



Month Day Year

Print Name *