



IMPORTANT- Please read and tick the box, as we need your permission.

GDPR regulations mean that we need to ask explicit permission from you for us to be able to communicate with you via the information-email or phone number contained below. Could you please tick the box to indicate that you are happy for us to do this. We will only use the data to communicate SDA related information. The only third party that we may share this with, are the companies that you have agreed for your child to perform with (Mardi Gras, Chance2Dance etc) and the BTDA or IDTA for those that choose to enter dance medal tests/exams. The data is held for this year and the subsequent year to enable us to contact you regarding the new terms dates and fees. I give permission for photographs of my child to be used on dance school flyers / dance school website / for local newspaper reports / show programmes.

I understand and am happy to give permission

Child's Name

School / College

Classes Joining
(Please Complete)

Day Venue

Day Venue

Day Venue

Day Venue

Medical information teachers should be aware of

Email Address

Emergency Telephone Numbers (please supply 2)

Contact No. 1 Relationship to child

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- I give permission for my child to walk home alone.
- I give permission for my child to be collected by
- I understand that I will be charged a late fee if I haven't paid my fees by the second session
- I am aware of the time the club ends and have made arrangements to collect my child promptly at the end of sessions
- By completing this form and giving my name below, I give permission for **emergency medical treatment** to be sought for my child if deemed necessary by the first aid trained teachers.

Parent / Guardian Name Date