

RESERVATION FORM

Please speak to us first to confirm availability and your choice of class before filling in this form.

Please use this form if you wish to reserve a class placing two or more weeks in advance of the date you wish to start. Once completed please return to the address on the attached leaflet with your reservation fee.

Pupils Name.....

If pupil below 18 years of age please provide:

Age,..... date of birth.....and parents name:.....

.....

Address.....

.....

.....Postcode.....

Phone No.....Mobile.....

I wish to reserve a place in the following class/es as agreed with the Dance Centre.

Class.....Day..... Time.....

Class.....Day..... Time.....

Start Date.....

I enclose £15 per class reservation fee, cheques payable to Chichester Dance Centre.

I understand that the reservation fee is non refundable or transferable but it can be deducted from the first terms fees. If without notification I do not take up the place offered on the agreed date, I understand that the place will no longer be guaranteed.

Signature.....

February 2007