

*R.K. Chandra Mohan*

Film Choreographer

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*Redifining Art's Through Excellence*

Ph.: 080-23424394 (Off.)

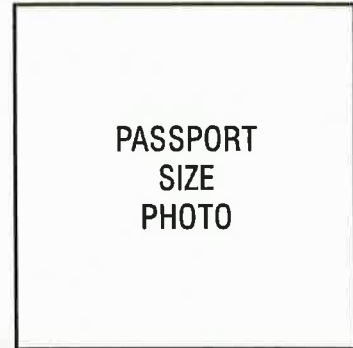
Web-site : www.dancewithrk.com

E-mail: spinnersdancestudio@gmail.com

facebook : spinnersdancestudiodancers

Linked in spinnersdancestudio with RK

## APPLICATION FORM



Reg. No.		BATCH TIME	
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1. Name of Applicant (in capital Letters)			
2. Father's Name			
3. Age & Date of Birth			
4. Blood Group			
5. Full Address			
6. Facebook / LinkedIn ID			
7. E-mail :			
8. Phone No.	Mob.:	Resi.:	
9. Education Particulars			
10. Field of Interest / Hobby's			
a) Dance	<input type="checkbox"/> Free Style <input type="checkbox"/> Bharathanatyam <input type="checkbox"/> Kuchipudi <input type="checkbox"/> Kathak <input type="checkbox"/> Salsa		
b) Aerobics			
c) Yoga			
11. Would you like to perform on stage/Live Programmes	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
12. Vaccinated or Not	<input type="checkbox"/> Yes	<input type="checkbox"/> No	(Only for Kids)

## **TERMS AND CONDITIONS :**

1. During the period of your membership you shall strictly adhere to the rules and regulations of the institute.
2. You shall pay the prescribed fees before the 6th of every month. Weekend classes by First week of every month
3. If at any time during your training you will be found guilty of any act of misconduct your registration/membership is liable for termination without any intimation.
4. The minimum age of the applicant will not be less than 4 years
5. Attendance in the class is compulsory and unauthorized absentation will not be acceptable for regular classes.
6. Students must be on Time.
7. In case of any injury caused by the negligence/carelessness on your part the institute shall not be held responsible.
8. Parents / Spectators are not allowed during class hours
9. Admission and monthly fees are not refundable and transferable.

1) (Name) ..... have read the above mentioned terms and conditions and agree to fully adhere to it.

\_\_\_\_\_  
**Signature of the Parent**

\_\_\_\_\_  
**Signature of Applicant**

**Date :**

**Place :**