

Blue Eyed Soul Dance Company
Open Day booking form

Tuesday 6th July 2010 10am – 6pm Shrewsbury Sports Village

Please complete information for our database, and print clearly:

First Name:

Surname:

Title:

Organisation:

Address:

Postcode:

Tel/Mobile:

Email:

Please contact me by (please tick all that apply):

Post: []

Email: []

SMS: []

I would like to hear about (please tick all that apply):

All Activity []

Child classes / courses / workshops []

Adult classes / courses / workshops []

Performances []

Professional Development / Training []

Education / Residencies in schools []

I agree to the above information being held on Blue Eyed Soul Dance's mailing list

[]

I agree to my details being passed onto other carefully screened cultural organisations so that they can mail me about events I might be interested in

[]

Signed:

Date:

Booking information

Age (please underline): 16-19years 20+ years

Emergency contact name & number:

Name of PA/Carer:
(If applicable)

£20 workshop fee enclosed (payable to Blue Eyed Soul Dance Company)

How did you hear about this event?

Please take time to complete the following information, so that we can support all participants during the project.

1. Do you have any medical conditions that we should know of eg: Diabetes, epilepsy, hearing impairment etc?

2. Do you have any specific access needs that we need be aware of?

3. Do you require a PA/Support worker for the duration of the project?

If so, will you be providing your own?

4. Have you had any previous participation in dance workshops or visiting professional companies?

5. How does this event relate to your existing programme if at all?

6. What are your expectations of the days?

Please insure that you wear suitable clothing to dance in, e.g. loose comfortable clothing, and bring a packed lunch.

*Please feel free to call if you have any further queries regarding access to the workshop.

- I agree to participate in the event

Name:

Signature:

Date:

- I give my permission for photographs/video footage (*please delete*) to be used in any future publication material.

YES/NO (Delete as applicable)

Signature:

Date:

Please return this booking form **by Monday 21st June 2010** to:
Moya Malekin, Blue Eyed Soul Dance Company, The Lantern, Meadow Farm
Drive, Shrewsbury, SY1 4NG. Tel: 01743 210830

Administration Notes:

Updated to spreadsheet:
Confirmation to participant:

Cheque enclosed:
Follow up required: