



UKDANCECLASS
CHAMPIONSHIPS

UKDCC “VIRTUAL” COMPETITION APPLICATION FORM

	CHILD'S NAME	Date of birth	TAP £6	BALLET £6	MODERN £6	TOTAL
GROUP 1						
AGE 6-7						
AGE 6-7						
AGE 6-7						
AGE 6-7						
AGE 6-7						
GROUP 2						
AGE 8-9						
AGE 8-9						
AGE 8-9						
AGE 8-9						
AGE 8-9						
GROUP 3						
AGE 10-11						
AGE 10-11						
AGE 10-11						
AGE 10-11						
AGE 10-11						
GROUP 4						
AGE 12-13						
AGE 12-13						
AGE 12-13						
AGE 12-13						
AGE 12-13						
GROUP 5						
AGE 14-15						
AGE 14-15						
AGE 14-15						
AGE 14-15						
AGE 14-15						
GROUP 6						
AGE 16-17						
AGE 16-17						
AGE 16-17						
AGE 16-17						
AGE 16-17						
Total						



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Principal's Name

School Name

Address.....

..... **Post Code**.....

Mobile Contact number

Email Address

Declaration;

I hereby agree to adhere to the Terms and Conditions as laid out by the Organisers of UKDCC.

I take full Responsibility for the fitness and health of each child from the above named School.

This declaration includes photograph permission.

Parental permission/Signature.....

Principal's Permission.....