



## Elite Youth Performance Team Registration Form

Student's Name: ..... Age:.....

Name of State School: .....

Parent's Name: .....

Contact Number:.....Email:.....

Address: .....

Suburb: ..... Post Code: .....

We agree for our child to participate in this team & commit to the course program starting from 30<sup>th</sup> August with classes held on Thursdays and Fridays from 4.30pm to 5.30pm.

.....  
Signature

.....  
Date

### Payment Options

Please organise a payment of \$204 or 3 payments of \$68 paid every 4 weeks for two classes a week.

Please pay by credit card or by electronic bank transfer.

Bank: NAB

A/C Name: Let's Dance Latin

BSB: 084 004 A/C No: 976 586 621

Reference: Child's Name

Or by Credit Card online using our Let's Dance Latin app or go to: [member.life/letsdancelatin](http://member.life/letsdancelatin)  
\$204 plus \$7.27 merchant fee or \$68 plus \$2.63 merchant fee.

Please register your child by completing this form and emailing to [info@letsdancelatin.com.au](mailto:info@letsdancelatin.com.au).  
Limited spaces available.