

## **GifT Dance**

## Registration of Interest Year 9 and 10 2016

STUDENT INFORMATION		
Surname:		
Given Names:		
Date of Birth:		
Home Address:		
		Postcode:
Current School:		Year Level:
PARENT / CAREGIVER INFORMATION		
Surname:	Given Name:	
Hama Bhara	Marile Bleaner	
Home Phone:	Work Phone:	
Mobile:	Email:	
STUDENT'S PREVIOUS EXPERIENCE / ABILITY		
Thank you for your Registration of Interest. Return your completed form to the address below. Alternatively you may email the form to <a href="mailto:dl.0903.info@schools.sa.edu.au">dl.0903.info@schools.sa.edu.au</a> . A staff member will		

Kyre Avenue, Kingswood SA 5062 **P:** 08 8272 8233 **F:** 08 8373 3013 **E:** dl.0903.info@schools.sa.edu.au **W:** www.mitchamgirlshs.sa.edu.au

contact you as soon as possible.





