SCHOOL/ COMPANY:

**Dance Workshop/ Group Lesson Booking Form**

ADDRESS:

CONTACT NAME:

PHONE:

EMAIL:

EMAIL ADDRESS FOR BILLING:

DATE(S):

*Please tick the following*

**LOCATION:**   AT DANCE FACTORY **OR**

 OTHER ADDRESS

**PACKAGE SELECTION:**

* **1-4 STUDENTS** – 1 HOUR

  **5 – 20 STUDENTS** – 1 HOUR

 **21 – 40 STUDENTS** – 1 HOUR

**20 OR LESS STUDENTS:** 1/2 DAY FULL DAY

**21 – 40 STUDENTS:**  1/2 DAY FULL DAY

TIME REQUIRED

**STYLE(S) OF DANCE:**

Jazz  Ballet  Contemporary  Lyrical

Hip Hop  Musical Theatre  Singing  Drama

Tap

Other (please list):

What standard and age are the

students?