



SCHOOL BOOKING FORM

School Name:

Address:

Postcode:

Contact Person:

Telephone No:

Email:

Time of Session:

Dates Required:

Workshop Style:

Street Dance

Afro-Caribbean

Contemporary

Modern Ballet

Urban Tap

Length of Session:

Half Day Workshop

Full Day Workshop

Evening Workshop

For Office use only:

Booked by:

Date:

Tutor:

Payment: