

# AFRIKA ABLAZE



Transformation Through Dance

## Afrika Ablaze registration form.

Dancers Name: \_\_\_\_\_

Date of Birth (MM/DD/YYYY): \_\_\_\_\_

Mailing Address:

\_\_\_\_\_

Primary Phone: \_\_\_\_\_ Phone (2):

\_\_\_\_\_

Name of Person responsible for paying fees:

\_\_\_\_\_

Primary Email Address:

\_\_\_\_\_

**By signing this form you also agree to all the points on the website under the enrolment tab.**

\_\_\_\_\_

Signature / Responsible Party

\_\_\_\_\_

Date

Please bring this form along when attending your first dance class including the R250 fee.

Email – [afrikaablaze1999@gmail.com](mailto:afrikaablaze1999@gmail.com) AND [ginosolomon31@gmail.com](mailto:ginosolomon31@gmail.com) for class times and days.