ABN 97 112 665 180

## 2020 APPLICATION FORM FOR THE NOELLE AITKEN JUNIOR ENCOURAGEMENT AWARD

## Grade 2 Level

VICTORIAN BRANCH

## Grade 3 Level

I wish to enter my child for the above and agree to comply by all the rules of Cecchetti Ballet Vic regarding the above. I declare all information listed is true and correct. I agree to hold blameless Cecchetti Ballet Victoria or any of their employees for any injuries or illness that may result from participation inabove

| Signature of Pare          | ent/Guardian:    |              |        |
|----------------------------|------------------|--------------|--------|
| Student's Surname:         |                  | Given Names: |        |
| Address:                   |                  |              |        |
|                            |                  |              | PC:    |
| Date of Birth:             |                  | Current Age: |        |
| Email:                     |                  |              |        |
| <b>Certificates Gained</b> |                  | Year         | Result |
|                            | Grade 1:         |              |        |
|                            | Grade 2:         |              |        |
|                            | Grade 3:         |              |        |
| Name of Teacher            | r for past 6 mon | ths:         |        |
| Name of Ballet S           | School:          |              |        |
| Teacher's Address          | ss:              |              |        |
|                            |                  |              |        |
| Talambana Numb             | 2044             |              |        |