**BALLADINE – Dance school**

**Application**

**Ing. Petra Chaloupková**

**address:** Hilleho 1, 602 00 Brno

**IČ:** 88507793

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http://www.balladine.cz

Applicants for the course after logging into the semester course of their choice and agrees to pay the appropriate price for tuition within 7 days of signing this application. By paying tuition participant consistently secured a place on the field. The account number for payments: 2100735900/2010. As a variable symbol write your date of birth in the format: DDMMYYYY, and to the note for the recipient write your name. Payment can also be made in cash at the reception in Balladine.

Hours missed due to illness, it is possible to replace the agreement of participation in the course or another day (maximum 2 hours per semester). The course participant will attend lessons on their own responsibility. The courses do not take place during all national holidays.

By signing this application, the participant demonstrates the approval of the school operating rules, the conditions of the course organizer and undertakes to pay the course fee within seven days of signing the application. I hereby voluntarily grant my revocable consent to the processing of personal data by the Administrator, Balladine, Ing. Petra Chaloupková, Company Identification Number 88507793, registered office in Brno-Žabovřesky, Kounicova 572/91, postcode 60200, contact data for handling the personal data agenda: e-mail: balladine@balladine.cz. All data collected is for the internal needs of the organization only, it is not used in any way and is not provided to third parties. Consent is also granted in connection with the Balladine presentation and promotional activity, in which it acquires image (picture) and audio / video recordings (video), both from various social events or training and from the normal operation of the dance school. The participant declares that he/she is familiar with the information on the processing of personal data, which can be found on the website www.balladine.cz.

**APPLICATION**

**BALLADINE**

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| **COURSE:** | |
| **Day\*:** | / MON / TUE / WED / THU / FRI / SAT / SUN / |
| **Name and last name:** |  |
| **Date of birth:** |  |
| **E-mail:** |  |
| **Phone number:** |  |
| **Prefer to communicate by\*:** only email **/** facebook group > balladine crew | |

\*circle the correct option

In ……..…………. day …………………….. Signature:

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