



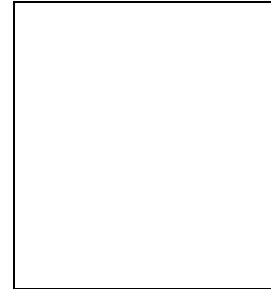
AUSTRALIAN BOARD OF HIGHLAND DANCING INC.

www.abhdi.asn.au

under the auspices of
THE SCOTTISH OFFICIAL BOARD OF HIGHLAND DANCING

Application for Registration as a Competition Dancer in the

BEGINNERS CATEGORY



Send to:- Home State/Regional Dancers' Registrar

ACTRCHDI
Mrs E Pooley
35 Mathieson Crescent
Weetangera ACT 2614

PLEASE PRINT IN BLOCK CAPITALS

Surname

First Names

Permanent Address

.....Postcode.....

Date of Birth

(To be verified on request)

.....Telephone No.....

Teacher's Signature

Teacher's Name

(please print clearly)

Address

.....Postcode.....

Telephone No.e-mail address.....

I enclose 2 passport photographs and the registration fee of and agree to abide by the Rules and Regulations of the ABHDI/SOBHD. Allow one month for processing card (& return Primary Card if applicable).

Cheques and/or Money Orders should be made payable to: **ACT Regional Committee of Highland Dancing Inc.**

Please enclose a stamped addressed envelope for return of card

It is accepted that this information may be stored by the relevant State/Regional Committee on a computer system.

Signature (Parent or Guardian if under 16)

Date

Registered Dancers taking part in un-registered Competitions and/or providing incorrect information will incur a six-month penalty. During this period they will not be accepted as eligible to enter any registered competition.

For Office Use ONLY:

Competitor's Registration Number Date of First Beginner's Competition.....

Year of registration

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Date of marking Beginners' Squares

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