



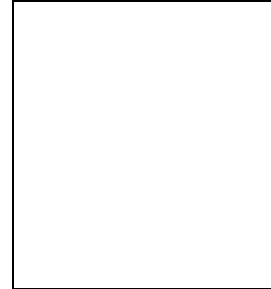
# AUSTRALIAN BOARD OF HIGHLAND DANCING INC.

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:- **ACT Registrar**  
Alison Dell  
13 Castlereagh Crescent  
MACQUARIE ACT 2614  
[alisonjanedell@gmail.com](mailto:alisonjanedell@gmail.com)

### **PLEASE PRINT IN BLOCK CAPITALS**

Surname .....

First Names .....

Permanent Address .....

.....Postcode.....

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

Date of Birth .....

(To be verified on request)

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 **\$40.00** and agree to abide by the Rules and Regulations of the ABHDI/SOBHD. Allow one month for processing card (and return of Primary card if applicable). Cheques and/or Money Orders should be made payable to ACT Regional Committee of Highland Dancing Inc. Money can also be direct deposited into the ACT Regional Committee Inc. Bank Account: **BSB: 032729; Account Number: 348980**

### **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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