

Enrolment Form



STUDENT DETAILS

First Name _____ Surname _____

Sex Female Male Date of Birth _____ Age _____ years (as at 31/03)

School/Kindergarten _____ Grade/Level _____

Please state any previous experience _____

Does the student enrolling suffer from any injuries or medical conditions? Yes No

If yes, please provide details _____

PARENT/ GUARDIAN DETAILS

First Name _____ Surname _____ Relationship _____

Address _____

Postcode _____ Home Phone _____

Email _____ Mobile _____

I wish to enrol my child in the following classes (please refer to timetable)

CLASS	DAY	TIME

How did you hear about us?

- Newspaper/magazine advertisement Flyer
- Google Friend/family member
- Other (please specify)

Do you give permission for your child to be used in promotional material for the school? Yes No

- I acknowledge that (a) I have received, read, understand and accept the Fees & Charges, Terms & Conditions and Code of Conduct;
- I accept the requirement to activate the Integrapay® direct debit system for payment of registration/enrolment fee and Term Fees.
- I agree that the non refundable registration/administration fee per student as shown in the Fees & Charges will be charged against a valid Integrapay® direct debit account upon receipt of any enrolment.
- I agree that Term Invoices will be charged against a valid Integrapay direct debit account in 4 x fortnightly payments commencing the first day of each term.

Signature _____

Date _____

Please Note: Acrobat Reader is required to insert a digital signature. Digital signatures cannot be inserted using Acrobat Preview. A free download of Acrobat Reader is available by [clicking here](#). Please email your signed form with digital signature to register enrolment. If you are unable to insert a digital signature then enrolment forms can be completed, printed, signed, scanned then emailed (or handed in at the studio in person).