



ENROLMENT FORM

PARENT/GUARDIAN INFORMATION

PARENT/GUAI	RDIAN 1			
NAME: RELATIONSHIP 1				TUDENT:
ADDRESS:				_
SUBURB:				POSTCODE:
(Circle Preferred)				(w)
MEDICARE NO):		_	
PARENT/GUAI				
NAME:			RELATIONSHIP TO S	TUDENT:
ADDRESS:				-
SUBURB:				POSTCODE:
(Circle Preferred)				(W)
Circle the met PHONE How did you h	MAIL	nunication you wo EMAIL	uld like to be update SOCIAL MEDIA	_
	FORMATION			
DOB:				
PHONE: (H)				
CLASSES ENRO	OLLED IN:		ssion for direct conta the information prov	act by staff to be made to my child rided above?
DAV AND TIME	E OE CLASSES			

MEIDCAL INFORMATION

Please list any allergies or medical conditions you wish us to be aware of. (Feel free to attach more detailed information on a separate piece of paper.)
Please list any physical or learning disabilities you wish us to be aware of. (Feel free to attach more detailed information on a separate piece of paper.)
Please list any other information you wish us to be aware of.
Photography and Videography
I give permission for my child to be photographed or videoed at events held by the studio and that they may be used in promotional material including; Website, Social Media, Newspapers, Flyers etc. Names may be included.
TERMS AND CONDITIONS Student or Staff Absence:
Private Lessons In the case of a student absence, 24 hours-notice must be given before your lesson time. If scheduling allows a make-up lesson will be organised, if not a credit will be added to your next invoice. No make-up lesson or credit will be given without at least 24 hours-notice. Every effort will be made by the studio to make up any private lesson where a staff member is absent. Credit of fees will only be given in the event of staff and student not being able to arrange a mutual time for a make-up lesson resulting from a staff absence.
<u>Group Lessons</u> Refunds will not be made if your child is absent from a group lesson. In the event of a staff absence, parents will be notified with at least two hours-notice. Every effort will be made by the studio to make up any group lesson where a staff member is absent. You may be entitled to a credit if you are unable to attend the makeup lesson date organised by staff.
Refund Policy In the event of a client leaving the studio, 50% of fee already committed will be refund.
Invoices Term fees will be emailed as invoices on the Monday of week two of each term unless notified otherwise. To receive a 10% discount, you must pay the discounted total by the following Friday in week two. If you are paying after the discounted period, your term fees must be paid in full within fourteen days of the issue date. An exception to this are those that have made alterative payment arrangements with staff. If you are paying by net-banking direct deposit you must text or email a proof of payment receipt to staff. Additional fees may be charged throughout the year in relation potential performance opportunities. These charges may include uniform, costume hire, sheet music, eisteddfod entries, provision of backing music, costumes etc.
<u>Late Fees</u> Fees paid after due date will incur a \$10 per week late fee. If accounts are in arrears at the end of each term, classes for the following term may only resume once payment for the previous term has been received.
Accident/Injury In the unlikely event of an accident, mishap, or illness during lessons at Dynamics Performing Arts Studio I hereby give permission to seek medical intervention. I understand that these services will be sought at my expense and as deemed necessary and/or appropriate by staff.
General I understand at times my child will have some physical contact with teachers for correction of technique. Parents must be fully satisfied that their child is in safe hands before leaving the premises and no child should be encouraged to leave the studio without supervision. Students should be picked up on time at the end of their classes. When students are dismissed from lessons, they are out of the studios care.
I have read and understand the policies listed above.

Name: ______ Signed: _____ Date: _____