

Office use only
App form from parent
pending: Y/N
If Y, form filled out by:

ENROLMENT FORM – JANUARY 2020 HOLIDAY THEATRE WORKSHOPS

Please complete and return with payment to:

STAGE LEFT, PO Box 134, Darling South Vic. 3145 info@stageleft.com.au Ph: 1300 369 443

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Please tick appropriate workshop: SENIOR GROUP: 8-16 y.o. 'Put on a show in a week' St. Mary's Primary School 91 Manning Rd, East Malvern STAGE KIDS: 4-7 y.o. 'Put on a show in a week' Phoenix Park Community Centre, Upstairs 22 Rob Roy Rd, EAST MALVERN		() WEEK 1: Monday 6 th January – Friday 10 th January (Mon – Thurs: 10am - 4pm, Fri: 10am – 6:30pm) () WEEK 2: Monday 13 th January – Friday 17 th January (Mon – Thurs: 10am - 4pm, Fri: 10am – 6:30pm) () AM Workshop: Monday 13 th January – Friday 17 th January (9.30am – 11.30am)			
Student's name:		M/F	Date of birth:	// *Non–Sibl	lings MUST use a separate form
IS THERE ANY MEDICAL CONDITION C please give details overleaf.	OR OTHER CIRCUM	STANCE OF WH	ICH YOU WOULD L	IKE THE SCHOOL	TO BE AWARE? YES/NO If yes.
Parent/Guardian:Address					
Telephone: Home Email	•				
 also ask students not to share food. I authorise SL to use photographs/v If students cancel prior to the comm SL reserves the right to try & fill this 	re it is impracticable to co-free policy at all venues. Parents are requested ideo taken during classe encement of workshop spot with a new student posit minus a non-refund of workshop. The available once the workshop in the workshop is a vailable once the workshop in	communicate with ms. Students are asket to inform SL in writings/performances for then the deposit is fat their discretion. It dable \$50 administrates at the state of the sta	ne, to whatever medical and not to bring any food any of any allergies their promotional purposes of orfeited. When cancella if the place is filled with a ation fee. The administration fee. The administration fee. The administration feet the enrolment que	or surgical treatment a containing nut product child may have. only. tion is received prior to a new student prior to tation fee is non-refundation fee	as may be deemed necessary. Its to classes and performances. We the commencement of the workshop the commencement of the workshop lable and non-transferable under any
I would like to pay:		Amount			
Deposit of \$95 per child					
OR Full foe for Conjectuarischen #425 / Ciblin	a diagount #20E				
Full fee for Senior workshop - \$425 / Siblin Full fee for Stage Kids workshop - \$205 / S					
TOTAL	bibling Discourt \$100				
PAYMENT BY CREDIT CARD *credit car □ *Please charge my card today for the de □ *Please charge my card today for the ful □ *Please charge my card today for the de Visa/Mastercard Card no/ Cardholder's name	posit only I workshop fee posit only with the ba///Signature	llance to be charg	ed on the first day of	the workshop	
	□ EFT EFT details: Account	number: 484059	374 BSB: 013 260	(Please include your	r child's full name as a reference)

OFFICE USE ONLY

Date received:

Method of payment - cheque/EFT/cash/credit card

Place offered: Y/N

Entered onto enrolment doc/waiting list Deposit/balance received Enrolment confirmed with parent/guardian:

Entered on database: Medical condition procedure actioned: Special notes: