



HVT STUDIO OF PERFORMING ARTS
Student Enrolment Form 2018
KINDERGARTEN TO ADULT CLASSES

Please tick options applicable

EAST MAITLAND

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CLARENCE TOWN

CLASSES: TAP BALLET JAZZ CONTEMPORARY/LYRICAL HIP HOP
EISTEDDFOD PRIVATE LESSONS: TAP BALLET JAZZ CONTEMPORARY/LYRICAL
EXAM PRIVATE LESSON: TAP BALLET SHARED EXAM PRIVATE LESSONS
ADULT CLASSES: TAP JAZZ BALLET/CONTEMPORARY/LYRICAL

CURRENT STUDENT

NEW STUDENT

Please indicate your agreed lesson days & times (if known): _____

STUDENT FIRST NAME: _____ STUDENT LAST NAME: _____

D.O.B.: ____ / ____ / ____ ADDRESS: _____

SUBURB: _____ POST CODE: _____ STUDENT MOBILE NO (if any): _____

STUDENT E-MAIL (if any): _____

EMERGENCY CONTACTS:

NAME _____ Relationship _____

MOB: _____ EMAIL: _____

NAME _____ Relationship _____

MOB: _____ EMAIL: _____

TERMS & CONDITIONS

Fees can be paid by direct deposit only using one of the two options;

FULL TERM PAYMENT BY WEEK 2 (20% discount) OR **WEEKLY**

- All lessons enrolled in and missed must be paid for.
- No refunds, discounts or credits will be given for any missed classes due to illness or holiday.
- No refunds for change of mind.
- Term fees not paid in full by week 2 will be charged at the weekly rate. This is to be set up as a weekly regular direct debit. Fees not paid within 4 weeks will result in termination of tuition.
- Four weeks notice must be given in writing to cancel any lessons currently enrolled in.
- Upon termination of tuition all music, routines, choreography and images (photographic & video) remain the property of HVT Studio of Performing Arts.
- If there is a pro-longed injury or illness i.e. Duration of 3 weeks or more a credit is eligible after presenting a doctors certificate.

Initial _____

INJURY/MEDICAL CONDITION & CONSENT

- It is the students/parents responsibility to inform their teacher of any injuries/medical conditions prior to class commencing.
 - In the event of a medical emergency, and where a parent or guardian cannot be notified, I authorise HVT Studio of Performing Arts to seek medial advice.
 - I acknowledge that with any physical activity there is a risk of personal injury involved. I understand that HVT staff members take the utmost care to provide a safe dance experience and neither HVT or it's teachers are responsible or liable for any injury/accident that may occur.

 - ALLERGIES OR LEARNING DIFFICULTIES TO BE AWARE OF _____
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Initial _____

MEDIA CONSENT

Students at HVT Studio of Performing Arts may be photographed or filmed and these photo's may be used for promotion purposes in newspapers, magazines, webpage's and social media.

If you don not wish for the students photo or footage to be used then please advise below;

I hereby consent to the students image/film being used for promotional purposes.

I do not give permission for the students image/film to be used for promotional purposes.

IF YOU ARE VIEWING CLASS THROUGH OUR VIEWING WINDOWS OR IN THE ROOM, RECORDING FROM MOBILE PHONES OR ANY OTHER PHOTOGRAPY IS STRICLY PROHIBITED.

Initial _____

How did you hear about HVT? Newspaper - Web - Flyer - Word of Mouth - School Newsletter – Yellow Pages – Facebook – Drive past

By signing this enrolment form you agree to the terms and conditions of HVT Studio of Performing Arts.

Parent/Guardian/Signature: _____ **DATE** _____

Annual registration fee to be paid on enrolment - \$35.00 Per Student

PAID BY DIRECT DEPOSIT ONLY (BSB: 082637 Acc: 823193640) DATE: _____

HVT is a nut free environment. Please don't bring any nuts or nut products into any HVT studio.