



Director: Kellie Fishwick-Roscoe RAD,RTS,Ad.Dip.ABS.TC,AISTD.

CRESWICK CAMPUS
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CRESWICK - STUDENT ENROLMENT - 2019

STUDENT NAME:

D.O.B:

AGE (as of 01/01/2019)

STUDENT MOBILE:

STUDENT MEDICAL CONDITIONS:

PARENT / GUARDIAN #1:
 (Invoice addressee)

POSTAL ADDRESS:

EMAIL ADDRESS:

Will be added to Email Database & Academy TeamApp

MOBILE PHONE:

Will be added to Academy TeamApp

HOME PHONE:

PARENT / GUARDIAN #2:

POSTAL ADDRESS:

EMAIL ADDRESS:

HOME PHONE:

MOBILE:

PLEASE TICK CLASSES ENROLLING IN

CLASSICAL BALLET

Including Dance-Play

CONTEMPORARY

(8+ year old)

JAZZ / HIP-HOP

& ACRO (5+ year old)

PRIVATE COACHING

and/or SOLOS

NOTES – Classes / Additional Training Requests:

ENROLMENT CONDITIONS AND AGREEMENT

1. Students are required to adhere to uniform regulations and be appropriately groomed.
2. Punctuality and respect for others is expected and students are enrolled to enjoy the training / environment at The Academy.
3. The Academy of Classical Ballet takes no responsibility for loss or damage to personal property.
4. In the case of an emergency, if the parent/guardian cannot be contacted, The Academy will act accordingly with any costs incurred bourn by the parent/guardian.
5. Students may be photographed and such used for any purpose of The Academy of Classical Ballet.
6. Students achievements may be used for purposes required by The Academy.
7. Students & Parents/Guardians hereby accept all Rules, Regulations, Policies and Requirements set by The Academy.
8. Parent/Guardian accepts responsibility for the full payment, by the due date, of all tuition fees, levies and any other charges set and/or incurred by The Academy of Classical Ballet. In the event where your overdue account is referred to a collection agency and/or law firm, you will be liable for all costs which would be incurred as it the debt is collected in full, including legal demand costs. All Fees are non-refundable.

Note: There is a \$45 (+GST) Enrolment Fee (Annual Fee Including Insurance Premium (Feb 2019 - Jan 2020), Student Diary and Administration Charges)

Parent/Guardian Name: _____

Parent/Guardian Signature: _____

Student Signature (if over 18): _____ **Date:** _____

OFFICE USE ONLY: DB QB INV E MCE ROLL DIARY T/APP FBookMmb C/E