

Enrolment Form 2024

To register as a student at Hume Dance School, please enter enrolment details and return along with \$30.00 annual registration fee per student.

Please note student's age is taken from January 1st 2024 they will only be permitted to move to an older age group if approved to do so by their teachers.

DANCER'S DETAILS:

Dancer 1

Dancer 1				
FIRST NAME:		SURNAME:		
AGE:		DOB:		
Previous Dance School:		Primary/High School:		
Medications /illnesses:	List any medications student is on	(eg. Ventolin), illnesses or injuries:		
Dancer 2				
FIRST NAME:		SURNAME:		
AGE:		DOB:		
Previous Dance School:		Primary/High School:		
Medications /illnesses:	List any medications student is on	(eg. Ventolin), illnesses or injuries:		
Dancer 3				
FIRST NAME:		SURNAME:		
AGE:		DOB:		
Previous Dance School:		Primary/High School:		
Medications /illnesses:	List any medications student is on	(eg. Ventolin), illnesses or injuries:		
PARENT/ GUARDIAN DETAILS:				
Contact 1—Note all information emails & SMS sent this contact.		Contact 2		
NAME:		NAME:		
Mobile:	Home:	Mobile: Home:		
Email:		Email:		
Address:		Address:		

Tick this box if you do not wish your child/children's photo to be taken. Photos are sometimes

taken during workshops, competitions and classes for our Facebook page.

CLASSES AND FEES

DAY	TIME	STYLE	Location
STUDENT 2:			
DAY	TIME	STYLE	Location
STUDENT 3:			
DAY	TIME	STYLE	Location
		3112	
	L		I
RTANT INFORMATION	I PLEASE READ BEFORE SIG	NING BELOW	
	ist wear appropriate dancewear and s		FERRED
·	vided, students participate at their ow ld treat all teachers, students and stat		heir enrolment will
cancelled with disregard to		ir with respect at all times of t	non chiomichi wiii
J	indable, however prearranged absend	ces of 4 weeks or more can b	e adjusted.
	about attending concerts/competi		•
equired to pay the costu	me ordered for your child/children.	•	
	4 Fama haa haan aanadatad ah	nd returned to Admin w	ith this form.
A Payment Agreement	t Form has been completed al		
	abide by the conditions above:		
clearly read and agree to	abide by the conditions above:		
clearly read and agree to		Date:	
clearly read and agree to	abide by the conditions above:	Date:	

TERM 3 S..... DATE:..... TERM 4 S..... DATE:.... Payment Agreement attached



PAYMENT AGREEMENT

I understand and agree that I am financially respo Fees stated in the amount below. I agree to pay the stated below.	
I understand that any remaining balance by the ell will occur an agreement late fee of \$25.	nd date will need to be paid in full or
Customer Name:	
Address:	
Student Name/s:	
Payment Amount:	Weekly (x10) / Fortnightly (x5)
First Payment Date:	
Renew for all Terms: Yes / No	Payment in full
Last Payment Date:	
Payments are the responsibility of the to be cancelled by either Hume Dance entire remaining balance will be due a	School or the customer, the
Customer Signature	- Date
Rebekah Field - Director of Hume Dance School	Date