ADULT ENROLMENT FORM

First Name:

Surname:

Address:

Phone:

Mobile:

Email:

Date of Birth:

Do you want to join as a member?:   yes   no   (circle)

How did you hear about the class?

Class Code:

Class Name:

CHILDREN'S ENROLMENT FORM

 Child's First Name:

Child's Surname:

Date of Birth:

Age of Child at Time of Enrolment:

Address:

Parent's Name:

Phone:

Mobile:

Email:

Emergency Contact Name: Mobile:

Do you want to join the Young Artists' Club for $17?Yes   No   (please circle)

How did you hear about the class?

Class Code:

Class Name: