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: