



2017 Student Enrolment Form

Student Name:.....Date of Birth/Age:.....

Classes Enrolling in (please List):

Term Student/Casual Student:

Exam student – Yes/No? What exams will you be doing in 2017 (ballet/jazz/tap/piano/latin)?

(Exam entries and fees are due closer to the exam closing dates TBC. Ballet, Jazz and Tap exam's are held around August/September each year. Ballet students grade 1 and above must attend at least 2 ballet classes per week to be eligible to enter into an exam. Students must be aged 5yrs (prep level) to enter an exam)

Parent/Guardian Name:.....

Contact Number:.....

Address:.....

Email (Required):

Any Special Needs/Requirements/Allergies:.....

How did you hear about us?.....

TERM FEE POLICY

Please read and sign the declaration below to confirm that you understand and agree to our Term Fee Policy. All Term fees are NON REFUNDABLE. **All term Fees must be paid in full in week 1** of term to receive the discounted rate. We do not accept part payments. If you are unable to pay the full term amount, you may pay the casual rate per class. All term students are given up to 2 makeup lessons per term if you miss a class. Invoices are sent out to your email the last week of term. If you require a paper invoice please let us know. There are no MONETARY refunds for missed classes. Students can choose to attend a makeup class of either the same level or same age group class. These makeup lessons are only given if we receive appropriate notice by Calling Heather 0431219202 before 3pm on the day of class, that a student will be missing class that day. If we do not receive notice, no makeup lesson will be given and the student will be marked as away. All makeup lessons must be made up before the end of the term. No leftover makeups will be transferred to the next term.

Performances/Exams: All performance fees and exams fees are non refundable.

Casual Students - Please make sure we receive payment BEFORE Class.

I (Parent/Guardian and Student's Name) _____ understand and agree to
Gerrard's Performing Arts Centre Term Fee Policy.

Signed _____ Date _____



Gerrard's Performing Arts Centre

PHOTO/VIDEO RELEASE FORM

By signing this release form, I authorize *Gerrard's Performing Arts Centre – GPAC*, to use the following personal information:

(1) My picture – including photographic, motion picture, and electronic (video) images.

(2) My voice – including sound and video recordings.

I hereby grant to *Gerrard's Performing Arts Centre – GPAC* its subsidiaries, licensees, successors and assigns, the right to use, publish, and reproduce, for all purposes, my name, pictures of me in film or electronic (video) form, sound and video recordings of my voice, and printed and electronic copy of the information described in sections (1) and (2) above in any and all media including, without limitation, cable and broadcast television and the Internet, and for exhibition, distribution, promotion, advertising, sale, press conferences, meetings, hearings, educational conferences and in brochures and other print media. This permission extends to all languages, media, formats and markets now known or hereafter devised. This permission shall continue forever unless I revoke the permission in writing.

I further grant *Gerrard's Performing Arts Centre – GPAC* all right, title, and interest that I may have in all finished pictures, negatives, reproductions, and copies of the original print, and further grant *Gerrard's Performing Arts Centre – GPAC* the right to give, sell, transfer, and exhibit the print in copies or facsimiles thereof, for marketing, communications, or advertising purposes, as it deems fit.

I hereby waive the right to receive any payment for signing this release and waive the right to receive any payment for *Gerrard's Performing Arts Centre – GPAC* use of any of the material described above for any of the purposes authorized by this release. I also waive any right to inspect or approve finished photographs, audio, video, multimedia, or advertising recordings and copy or printed matter or computer generated scanned image and other electronic media that may be used in conjunction therewith or to approve the eventual use that it might be applied.

I acknowledge that I have read the foregoing and I fully understand the contents.

Name:

Signed:

MINORS RELEASE

(If release is provided on behalf of a minor:)

I hereby certify that I am the parent or guardian of _____, who is under the age of eighteen years, to whom this release applies and that I have the legal authority to execute this release. I approve the foregoing and agree that we both shall be bound thereby.

Parent/Guardian Name: _____

Signature: _____