



ART CLASS ENROLMENT FORM

STUDENT INFORMATION

Full Name:	Preferred Name:
------------	-----------------

Date of Birth:	Age at time of enrolling:	Grade at School:
----------------	---------------------------	------------------

Current Address:

Suburb:	State:	Postcode:
---------	--------	-----------

Email Address:	Phone Number:
----------------	---------------

Injuries / Illness (eg asthma, allergies): Please attach additional information as required.

I give permission for standard first aid to be administered to my child if required.
 YES NO

I give permission for emergencies services to be called and my child to be transported if required.
 YES NO

I give permission for my child to appear in ONCE Designs promotional material and social media posts. YES NO

PARENT/GARDIAN INFORMATION

Name:

Address:

Email:	Phone:
--------	--------

Relationship to Student:

ALTERNATIVE EMERGENCY CONTACT		
Name:		
Phone:		Relationship to Student:
CLASSES (please tick)		
<i>Tuesday Drawing \$15 per class</i>	5 to 9 yrs Tuesday 3:45pm to 4:30pm	10yrs and over Tuesday 4:45pm to 5:30pm
<i>Wednesday Famous Artists - Acrylic Painting \$20 per class</i>	Mixed Ages Wednesday 4:00pm to 4:45pm	12yrs and over Wednesday 5:00pm to 5:45pm
PAYMENT Paid in full by Week 3 – 10 week term Tuesday Drawing - \$150 full term Wednesday Acrylic Pouring - \$250 full term		
<input type="checkbox"/> Direct Debit: Once Designs BSB: 014253 Acc: 218486656	<input type="checkbox"/> Credit Card 2% fee	<input type="checkbox"/> CASH
By signing this form you are agreeing to enrol your child in ONCE Designs program for the full term and to paying the fees associated. Invoices will be sent on week 2 of the term and are payable in full at this time.		
Name:	Signature:	Date: