



2012 ENROLMENT FORM

Date of Enrolment: _____

Name of Student: _____

Date of Birth: _____ Current Age of Student: _____

Address: _____ Post Code: _____

Parent Name(s): _____

Contact Details: Home: _____ Mobile: _____

Work: _____ Fax: _____

Email address: _____

In the interest of the environment, Blakehurst Academy prefers to send newsletters and information to you via email. Please state if you would prefer to receive a paper copy instead. Paper copy

Health Issues (eg: asthma etc): _____

Classes to be attended:

RECREATION STRAND

| CLASS | DAY | LEVEL |
|-------|-----|-------|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

TRIPLE THREAT STRAND

| CLASS | DAY | LEVEL |
|-------------|-----|-------|
| Ballet | | |
| Jazz | | |
| Stretch | | |
| Elective 1: | | |
| | | |
| | | |
| | | |
| | | |

PHOTOGRAPH RELEASE

I, _____ hereby give Blakehurst Academy of Performing Arts permission to utilise photographs taken of (*student name*) _____ throughout the year for use on any advertising material that the Academy feels fit. This may include the Blakehurst Academy web page, Concert Programme, general advertising and Concert DVD as well as other material.

Signed: _____
(parent/guardian if under 18)