



# ELTHAM HIGH SCHOOL CHOIR PROGRAM 2015

## ENROLMENT FORM

### STUDENT DETAILS

Student's name: \_\_\_\_\_

Year (eg. 7A): \_\_\_\_\_

### FAMILY DETAILS

Parent name: \_\_\_\_\_  
*First name* *Surname*

Address: \_\_\_\_\_  
\_\_\_\_\_ Postcode: \_\_\_\_\_

Telephone: (Home) \_\_\_\_\_ (Work) \_\_\_\_\_

Mobile \_\_\_\_\_

Email address: \_\_\_\_\_

I/We understand that the Choral Program is self funded. I/We undertake to pay all accounts by the due date. I also understand that if the music account is not paid by the due date, or if no arrangement is in place with the Business Manager, my child will be withdrawn from the program until all outstanding program invoices are paid.

Signed \_\_\_\_\_ Signed \_\_\_\_\_

Dated \_\_\_\_\_

*(In two parent families, both parents are to sign)*