

Patrick Studios Australia Part-Time School Enrolment Form

Phone: (03) 9529 8221

Email: info@patrickstudiosaustralia.com.au

Students Name: _____

Date of Birth: _____ Age: _____

Address: _____

Phone (h) _____ (m) _____

Email _____

Parents' Contact Information:

Name: _____

Relationship _____

Address: _____

Phone (h) _____ (m) _____

Class Selection: (please tick both columns where appropriate)

LEVEL:

- Creative Dance
- Junior
- Teen
- Senior
- Beginner

CLASS:

- Ballet
- Jazz
- Hip Hop
- Acrobatics
- Tap
- Boys Class

Payment

Number of Classes: -----

Payment per class: -----

Total -----

Less: Discount: -----

Total Due: -----

Student Signature: _____ Date: ___/___/___

Parent/Guardian Signature _____ Date: ___/___/___
(If student is under the age of 18)

Please attach payment & send to:
Patrick Studios Australia
4 / 40 Green St
Prahran, Vic 3181

