Enrolment Form

Child #1
NAME…….. ……
(First Name) (Surname)

AGE…… **DATE OF BIRTH**……. **Female Male**

Child #2
NAME…….. ……
(First Name) (Surname)

AGE…… **DATE OF BIRTH**……. **Female Male**

Child #3
NAME…….. ……
(First Name) (Surname)

AGE…… **DATE OF BIRTH**……. **Female Male**

CONTACT DETAILS

Next of Kin #1:…… (Mob)…… Next of Kin #2:…… (Mob)……

(email/s)……..... (email/s)…….....

MEDICAL CONDITONS: ……..

ACCOUNT TO

Mr/Mrs/Ms……. ……
(First Name) (Surname)
Postal Address……..

Town……. Postcode……...

Residential address if different to postal …….....

Town……. Postcode……

Please read carefully:
I, the undersigned parent/guardian of the above named child/ren agree that any activities in which he/she participates are entirely at his/her own risk. In the event of an accident or illness, I will attend to such medical assistance as the child may require. I accept the responsibility of transportation of the child to and from PE lessons. I am aware that term fees are due and payable at the beginning of each term. Missed lessons are not refundable.

*** SIGNED**……. **DATE**…….
(Parent or Guardian)

(Please print name) ……

Authority to Release: I give permission to *STEWY'S PE* to display, print, copy and publish in *STEWY'S PE* brochures, posters, flyers, website, Facebook Page, video and in newspapers and other promotional material, photos or video footage of my child taken during PE lessons.

***SIGNED**……. **DATE**……

STEWY'S PE Contact: stewyspe@gmail.com Stewy: 0490257880