

THEATRE STREET



Enrolment Registration Form

Office: 266 Belmont Road, Bexleyheath, Kent DA8 1LG Tel: 01322 441 977 www.theatrestreet.com

PARENT NAME

ADDRESS

TELEPHONE

MOBILE

WORK

EMAIL ADDRESS

CHILD'S NAME

MALE

FEMALE

AGE

DATE OF BIRTH

MEDICAL CONDITIONS/HISTORY/ALLERGIES ETC

NAME OF CURRENT PRIMARY/SECONDARY SCHOOL

NAME OF ANY ADULTS WHOM YOU MAY WISH TO COLLECT FROM TSSPA

CLASS(ES) YOU ARE ENROLLING FOR (ie Ballet/Stage School etc)

From time to time, the School will have photographs appear in local press stories and/or advertisements to help promote the School, and some performances will be recorded (for the benefit only of the families of those involved in the performance). No such recording will be available to the wider general public. If you prefer that your child be excluded from any such photographic/recorded archiving, publicity, local press & advertising, tick here or inclusion on the website tick here

If for any reason, religious or otherwise, you as parent/guardian object to the administration of first aid in the event of an accident/emergency, tick here

I have read and I accept the attached terms and conditions of enrolment, admission and attendance and undertake to be bound by the same. This form incorporates the terms and conditions sent with it. Upon signing this form, parents/guardians are deemed to have read, understood and agreed the same. Tick here