



THE RITZ PERFORMING ARTS CENTRE 2019 ENROLMENT FORM

Student details:

Full name: _____

Date of birth: _____

Student Address: _____ postcode _____

Student phone numbers: home _____ mobile _____ work _____

Student email: _____

Medical information (eg asthma): _____

School / ed. inst. attending: _____ grade: _____

Can student read music? _____

Any previous dance/drama/singing/acrobatics experience? _____

How you found out about The Ritz:

- ☐ Website *If a person referred you to us, please name that person:* _____ *If you saw a Ritz Performance, where was it?*
- ☐ Facebook *Ritz Student name:* _____ ☐ Eisteddfod/Competitio
- ☐ Studio Sign *Ritz Teacher name:* _____ ☐ Fete/Concert
- ☐ Car Signage
- ☐ Studio Sign
- ☐ Car signage
- ☐ Newspaper Story ☐ Someone else, eg podiatrist: _____ ☐ Other place: _____

What would you like to achieve at The Ritz Performing Arts Centre? (use back of form if insufficient space)

Account: Accounts are the responsibility of persons #1 & #2 unless you specify otherwise on this form.

OR: are you an adult student and responsible for this account? YES / NO

Parent / Guardian / Carer / Partner #1: Relationship to student: _____

preferred title: _____ full name: _____

home address: _____ Suburb: _____ P/code: _____

home phone: _____ mobile phone: _____ work phone: _____

occupation: _____ work address: _____

email: _____

Parent / Guardian / Carer / Partner #2: Relationship to student: _____

preferred title: _____ full name: _____

home address: _____ Suburb: _____ P/code: _____

home phone: _____ mobile phone: _____ work phone: _____

occupation: _____ work address: _____

email: _____

Someone else? (an emergency contact): Relationship to student: _____

preferred title: _____ full name: _____

home address: _____ Suburb: _____ P/code: _____

home phone: _____ mobile phone: _____ work phone: _____

occupation: _____ work address: _____

(I am / We are) responsible for prompt payment of this account, including late fees. (I/We) understand that the persons named in this form are bound by the Terms and Conditions of the Ritz Performing Arts Centre. (I/We) understand that the Terms and Conditions are published in the 2019 Handbook & Timetable/Fee Schedule.

Signature(s) and date of above person(s) agreeing to the above: _____

person#1 or adult student _____ date _____ Person#2 _____ date _____

RITZ STAFF USE:	Date Received:	Received By (Staff Name):
Receipt Number:	Amount Received:	Payment by EFTPOS/CHQ/CREDIT/CASH/DIRECT DEBIT
DANCE, SING, ACT!	<input type="checkbox"/> enrolment form in full <input type="checkbox"/> Class Bid Form	DSA Entry by:

