



enrollment form

Name

Address

Post Code

Date of birth

Email

Home telephone no

Mobile telephone no

Any medical conditions or allergies (give details)

Which classes are you enrolling in?

Do you give parental consent for images or video footage of your child to be used within marketing, e.g web-sites, advertising (if under 18 years) tick box:

YES NO

Where did you hear about Fusion Performing Arts?

I agree to the terms and conditions of Fusion Performing Arts

Signed

Date

Please return to Fusion Performing Arts, 53 Longacres, St Albans AL4 0SL

or mailto: info@fusionperformingarts.co.uk

www.fusionperformingarts.co.uk Tel: 07725 846339