

waverley woollahra art school
School Holiday Program Enrolment Form

CHILDS NAME:.....AGE.....

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CHILDS NAME:.....AGE.....

PARENT/GUARDIAN'S NAME:.....

POSTAL OR EMAIL ADDRESS

DAYTIME TELEPHONE NUMBERS

Please write the number of children attending each session in the boxes below.

| Class | Mon 27 Sept | Tues 28 Sept | Wed 29 Sept | Thur 30 Sept | Fri 1 Oct |
|------------------------|----------------|-----------------|----------------|-----------------|--------------|
| Morning (5 - 7 yrs) | | | | | |
| Morning (8 - 11 yrs) | | | | | |
| Afternoon (5 - 7 yrs) | | | | | |
| Afternoon (8 - 11 yrs) | | | | | |
| Class | No class | Tues 5 Oct | Wed 6 Oct | Thur 7 Oct | Fri 8 Oct |
| Morning (5 - 7 yrs) | | | | | |
| Morning (8 - 11 yrs) | | | | | |
| Afternoon (5 - 7 yrs) | | | | | |
| Afternoon (8 - 11 yrs) | | | | | |

Prices = half day \$30.00 / full day \$60.00

I enclose cash/ cheque for \$.....

or debit my Mastercard / Visacard with the sum of \$.....

Card Number: Expiry:

SIGNATURE:

To Book: mail this form to us at 138 Bondi Rd, Bondi 2026, fax it to us on **9389 1486** or phone us on **9387 2461**. Telephone bookings will only be accepted with a credit card payment.

Refunds: No refunds will be given unless the Arts Centre is advised **24 hours prior** to commencement of the class.

Confirmation: No receipts are sent. We will only contact you if we **can't** accommodate your booking.