



School-Readiness Music Program Enrolment

*To enrol for this program you must have a group of up to 6 children between the ages of 3 – 5 y.o.
Booking must be made on a term by term basis.*

Contact person for the group: _____

Email: _____ Mobile: _____

Weekly sessions are 30 minutes, must be booked on a term by term basis. Please nominate your group's preferred times for weekly session:

Option 1 - Day _____ Time: _____

Option 2 - Day _____ Time: _____

Option 3 - Day _____ Time: _____

Group members to be enrolled:

Child 1: _____ D.O.B: _____ Diagnosis: _____

Parent: _____ Mobile: _____

Email: _____

Address: _____

Child 2: _____ D.O.B: _____ Diagnosis: _____

Parent: _____ Mobile: _____

Email: _____

Address: _____

Child 3: _____ D.O.B: _____ Diagnosis: _____

Parent: _____ Mobile: _____

Email: _____

Address: _____

Child 4: _____ D.O.B: _____ Diagnosis: _____

Parent: _____ Mobile: _____

Email: _____

Address: _____

Child 5: _____ D.O.B: _____ Diagnosis: _____

Parent: _____ Mobile: _____

Email: _____

Address: _____

Child 6: _____ D.O.B: _____ Diagnosis: _____

Parent: _____ Mobile: _____

Email: _____

Address: _____

Terms & conditions:

1. Group members are expected to attend on a weekly basis on a term by term basis.
2. Parents & carers are to be with their children at all times
3. Fees are payable on a term by term basis by cash, cheque or direct debit within 14 days of the invoice date. This term fee is non-refundable.

I have read and understood the terms and conditions and any questions I have asked have been answered to my satisfaction.

Name: _____ Signature: _____ Date: _____