## **BRIGHT LIGHTS HOLIDAY WORKSHOP**

## **ENROLMENT FORM**

NAME:					
ADDRESS:					
MOBILE:			(Parent)		•
EMAIL:					(Parent)
NOTE: We us	e email as	<u>a means o</u>	f communication	on. Please prir	nt email addresses clearly.
SCHOOL:				<del>_</del>	
SCHOOL YEAR LEVEL 2024:				AGE:	
PARENT/ CAF	RER'S NAM	IE/S:			
Performance S website. Pleas We take full ca We expect an	School. So se advise us re and resp appropriate	me of thes if this is a onsibility fo e level of b	se may be used problem. r all students du ehaviour from e	l as promotion ring their alloca ach student.	main the property of Bright Lights hal shots on our posters and our ated class times only.  Parents will receive notification it into the prove they will be unable to
I understand a	nd agree to	the above t	terms.		
Parent signatu	re:			<del> </del>	
FEES:	4 DAY CC	URSE	\$260:00 per	student	
DISCOUNTS:	\$30 disco	unt for Brigl	<mark>nt Lights weekly</mark>	students or 20	22 holiday workshop participants
PAYMENT:	We accept direct deposit (preferable)/cash/cheque.				
			s payable to 'Bri Possumwood P		mby, 2482
Direct Deposit:		ACCOUN'	T NAME: Bright	Lights Perform	nance School
			2578		
		ACCOUN'	T NUMBER: 103	314283	

**REFERENCE:** Use your child's name as a reference code