

# Private Art Classes - Enrolment Form

## Vermont Primary School - Claire Sunderland

### Term 4, 2025

#### PRIMARY CLASSES

Thursday - 3.45pm - 4.45pm

**Classes start - 16th October**

**Last Class - 4th December**

Student Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Grade: \_\_\_\_\_

Parent / Guardian Names: \_\_\_\_\_ Telephone: \_\_\_\_\_

Email Address: \_\_\_\_\_

Emergency Contact Number (1)

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Emergency Contact Number (2)

Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Medicare No.: \_\_\_\_\_ Do you have Ambulance Cover? YES NO

Family Doctor: Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Address: \_\_\_\_\_

Does your child have any medical conditions, allergies, special needs, custody arrangements that the tutor should be aware of? YES NO

If yes, please give details



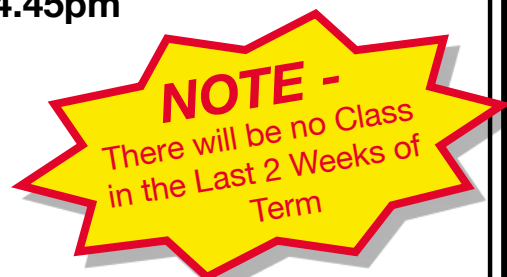
**\$176.00 for 8 Sessions - Thursday 3.45pm - 4.45pm**

(\$22.00 incGST per class)

**Direct Debit:**

Account Name: Claire Sunderland

BSB: 193-879 A/C: 457862508



Return this completed form to the Art Room. OR attach to email and send to [claire@theartisticdragonfly.com.au](mailto:claire@theartisticdragonfly.com.au)

Please note that refunds will not be made due to holidays, illness, etc.

If more than 2 consecutive classes are missed a credit may be forwarded to the following term.

I understand that I will need to collect my child and sign them out from the Art Room, unless prior arrangements are made in writing.

I understand that a fee may apply if my child is not collected on time.

In the event of illness or injury, I authorise the person in charge to seek medical attention as deemed necessary.

**Places are allocated on a 1st come, 1st served basis. Payment must be made to secure your place.**

**For all enquiries, contact Claire Sunderland**

**Mobile: 0418 179 295.**

**Email: [claire@theartisticdragonfly.com.au](mailto:claire@theartisticdragonfly.com.au)**

Signed: \_\_\_\_\_ Date: \_\_\_\_\_