



CERTIFICATE REQUEST

If you have returned your certificate there is no need to fill in this request

- 1) Students Name Not collected last term Lost/damaged New student
 Instructor Name:..... Day of lesson..... Time of lesson in Term 2.....
- 2) Students Name Not collected last term Lost/damaged New student
 Instructor Name:..... Day of lesson..... Time of lesson in Term 2.....
- 3) Students Name Not collected last term Lost/damaged New student
 Instructor Name:..... Day of lesson..... Time of lesson in Term 2.....

REBOOKING & NEW BOOKING FORM

- 1) Students first name Students Surname D.O.B.
Day Preferred (please circle) Mon Tues Wed Thur Frid Sat Sun (1st, 2nd and 3rd pref are helpful) Time Pref :
Preferred instructor/s (please circle) – Elliott Genevieve Jennimay Jordan Lizanne Nairi Ross Zoe any
- 2) Students first name Students Surname D.O.B.
Day Preferred (please circle) Mon Tues Wed Thur Frid Sat Sun (1st, 2nd and 3rd pref are helpful) Time Pref :
Preferred instructor/s (please circle) – Elliott Genevieve Jennimay Jordan Lizanne Nairi Ross Zoe any
- 3) Students first name Students Surname D.O.B.
Day Preferred (please circle) Mon Tues Wed Thur Frid Sat Sun (1st, 2nd and 3rd pref are helpful) Time Pref :
Preferred instructor/s (please circle) – Elliott Genevieve Jennimay Jordan Lizanne Nairi Ross Zoe any

Parents Names:..... School attending:

Email:.....(please write clearly)

Address:..... Postcode:.....

Phone: MOTHER Home..... Work..... Mobile.....

FATHER Home..... Work..... Mobile.....

COURSES AVAILABLE - PLEASE TICK REQUIRED BOX/BOXES

JULY HOLIDAYS - Closed

- | | |
|---|--|
| <input type="checkbox"/> TERM 3 2017 ONLY
24 th July to 1 st October | <input type="checkbox"/> ALL TERMS UNTIL FURTHER NOTICE |
| <input type="checkbox"/> ALL HOLIDAY COURSES
UNTIL FURTHER NOTICE | <input type="checkbox"/> ALL TERMS AND HOLIDAY COURSES
UNTIL FURTHER NOTICE |

CANCEL ALL FUTURE BOOKINGS FOR.....