



2020 Enrolment Confirmation & Media Consent Form

For statistical purposes Regional Conservatoriums are required by the Department of Education to collect certain data. We appreciate your cooperation in providing full details.

Student Name: _____ DOB ____/____/____

Male Female Sibling of existing student: Yes No

Is the student of Aboriginal or Torres Strait Islander background: Yes No

Is the student from a non-English speaking background: Yes No

Does the student participate in any gifted/talented program: Yes No

Name of school student attends: _____

Mother – Given Name/s: _____ Surname: _____

Father/Guardian – Given Name/s: _____ Surname: _____

Phone: (home) _____ (mobiles) _____

Phone: (work) Mother _____ Father _____ Guardian _____

Home Address: _____ Postcode: _____

Postal Address: (if different from above) _____

Email: _____ Student AMEB number: (if applicable) _____

Are you aware of any condition or disability that may affect the student's learning process? Yes No

PERMISSION FOR MEDIA APPEARANCES

I give permission for myself, son/daughter (as named above) to be photographed, named filmed and interviewed, in the circumstances outlined in the attached *Enrolment Information* brochure in **All News Media in Australia*, *Conservatorium newsletter*, *Conservatorium* and/or *DET* related promotions, on the **World Wide Web*. (*NOTE: If you wish to specifically withhold consent from any one of the above media, please exclude them by crossing them off the form.)

I understand that this consent remains until 31st December 2020, and if I wish to review my consent I should contact the Conservatorium.

I have read, understood and hereby agree to abide the Conditions of Enrolment, as outlined in the latest Enrolment Information Brochure. I understand that this enrolment will continue until I give written notice for lessons to cease, and that 3 weeks notice is required to cancel lessons.

Student/Parent/Guardian _____ Date ____/____/____

Please return to:

**Mitchell Conservatorium Inc • PO Box 1387 Bathurst 2795 • Ph 6331 6622
or bathurst@mitchellconservatorium.edu.au**

Instrument	Length of lesson	Day & Time	Teacher	Date to Start/ed

Please turn over and complete for all students under the age of 18.

**To be completed for each student (under 18 years)
attending lessons in Mitchell Conservatorium buildings.**

Student Name: _____

Teacher: _____

Staff must ensure, as part of their Duty of Care, that Infants and children (under the age of 18) do not leave the Conservatorium building until a parent or person designated by the parent comes to collect them. Parents are requested to ensure that their infant or child is aware that they must not leave until their parent or person designated by the parent comes to collect them.

Usual pick up arrangements: Parent

Other authorised person/s

If not being picked up, I authorise my child to leave the building to:

Walk

Taxi

Bus

Other _____

If any deviation from the usual pickup procedure is necessary, I will inform my child's teacher in writing on each occasion.

Signed: _____

Parent/Guardian

Summary of Key Points to note at time of Enrolment

- **3 Weeks' Notice in writing is required to cancel lessons**

- **Action in the event of non-payment of fees**

In the event of the Customer being in default of their obligation to pay and the overdue account is then referred to a debt collection agency, and/or law firm for collection, the Customer shall be liable for the recovery costs incurred and if the agency charges commission on a contingency basis the Customer shall be liable to pay as liquidated debt, the commission payable by the Supplier to the agency, fixed at the rate charged by the agency from time to time as if the agency has achieved one hundred per cent recovery and in the event where the Supplier or the Supplier's agency refers the overdue account to a lawyer the Customer shall also pay as a liquidated debt the charges reasonably made or claimed by the lawyer on an indemnity basis.