

Churchtown School of Music Enrolment Form 2019-2020

The Village Centre,
Dundrum,
D14



Phone: Landline 01 298 9185 Mobile 087 247 1208

Email: info@churchtownschoolofmusic.com

Each instrument/student requires a separate enrolment form and deposit.

Name of Student: _____

Date of Birth: _____

Address: _____

Name of Parent/Guardian: _____

Phone: Home: _____ Mobile: _____

Email: _____

School Attending: _____

Instrument or Subject you wish to study:

Does your child have any medical condition we should be aware of?

Please forward deposit of €100 to the above address by Thursday 17th May. After this date we cannot guarantee you the same teacher and day/time.

I have read and agree to the terms and conditions overleaf.

Signed: _____ (Parent / Guardian)

For Office Use Only

Date Received: _____

Deposit: Cash / Card / Cheque

Teacher: _____

Lesson Time: _____