

THE PROJECT PERFORMING ARTS APPLICATION FORM



SPRING TERM 2023

Saturday 7th January – Saturday 1st April

Half Term – Saturday 18th February 2023

PUPILS DETAILS:

NAME: _____ AGE/D.O.B: _____

HOME ADDRESS: _____

_____ POSTCODE: _____

NAME OF SCHOOL: _____

PARENT/CARER DETAILS:

NAME: _____ MOBILE: _____

HOME ADDRESS: _____

_____ POSTCODE: _____

EMAIL: _____

MEDICAL DETAILS:

Does your child have any allergies or medical conditions? Y/N. If yes, please give details

EXTRA DETAILS (OPTIONAL)

Are there any other details that you think we should know? For example, does your child have any special educational needs that we can assist with?

PLEASE TICK AS APPROPRIATE

I am paying the term amount of £240

I would like to pay £20 cash weekly and understand that my child has a place at the school, therefore I must pay for every week of the term, even if my child does not attend every week.

I am a new pupil paying cash for my trial two weeks.