



Sing it with Sharon
Just Sing What You Feel

Registration Form

Students First Name

Surname

Address

E-mail

Date of Birth

Parent / Guardian
Contact name

Mobile

Emergency
Contact name

Class

Emergency Number

SJ
5-6PM

JNRS
6-7PM

SNRS
7-8PM

ADVAN
8-9PM

Any medical history/allergies or special needs?

NO

YES

If Yes please provide
details below

I give my permission for emergency first aid to be given OR
ambulance to be called if deemed necessary

I agree to the capture and use of photographic images, film and sound recordings of the named participant, for use in the documentation, promotion, marketing and publicity of Sing it with Sharon. These images and recordings may be used at concert, reproduced and distributed in print for programs, electronically and mechanically, including via websites and e-mailings & all social media.

I agree to pay the Term Fees on the dates specified, I am aware that I will incur a late fee if Term fees are not paid after 4 weeks.

I am aware that Term Fees do not include Costume hire, Extra rehearsals or Concert Fees

I am aware that Concert Fees are approx. \$200 and are separate to purchasing Concert tickets

I confirm I have read & understood the Term & Conditions and Health & Safety Policies. I am aware that these documents are available to read & download on the website at www.singitws.com.au

Parent/ Guardian
Print Name

Signature

\$25.00 Registration
Fee Paid