I wish to enrol my child for the after school activities program with effect from (date)		
Details of my child/children is/are as under:		
Name of Child:		
Grade & Section:		
Please tick () any option given below:		
Tennis		
Skating		
☐ Basketball		
Foreign Language – Japanese / French / Both		
☐ Drama – Certification from the Helen O Grady International.		
Music – Certification from the Trinity College, London		
Sports and Fitness program from the Jump Bunch International, USA		
Name of Parent:		
Signature of Parer	nt:	
Address:		
Telephone / Mobi	ile number:	
Email Id:		

IMPORTANT NOTE:

- 1. Seats are based on first cum first basis. Contact school office for Fee details.
- 2. A minimum intake of 15 and a max of 20 enrolments per activity are required.
- 3. You will be invoiced every term along with the Term fees.
- 4. Please inform us in advance if you plan to withdraw your child in writing to the school office.
- 5. Students to make their own Transport arrangements