**AUTUMN TERM 2019**

**Tuesday 3rd September – 22rd October (8 WEEK TERM)**

To be completed AND returned to Laura Chesworth.

**Name OF PUPIL………………………………………………………AGE..……………………………………………………**

**My son/daughter would like to attend dance classes after school.**

METHODS OF PAYMENT (1 child)

**1st Payment Due by 3rd September 2019. £36.00**

 **OR**

**2nd Payment Due by 3rd September 2019. £18.00**

 **Due BY 1st  oCTOBER 2019 £18.00**

**I request classes for my son/daughter named above and undertake to pay the fees due for the entire term whether my child attends or not.**

**PLEASE COMPETE THIS FORM AND RETURN TO LAURA OR THE SCHOOL OFFICE.**

Bacs: Sort Code**: 30- 99- 36** Account No**: 30970868** Ref: Please reference your CHILDs name

 PRINT NAME ……………………………………….………………………………………………..……….*(Parent/Guardian)*

 Signature ……………………………….…………………………Date …………………………………….