



**STUDENT ENROLEMENT FORM
AND MEDIA CONSENT**

STUDENT ENROLEMENT FORM:

Date:/...../.....

Student Name: Student D.O.B:/...../.....

Address:

..... Post Code:

Home Telephone: Mobile:

Email: Other:

Parent/Guardian Name (if applicable):

Emergency Contact Number:

To help with our marketing, please tell us how you heard about us:

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MEDIA CONSENT:

During the time that you/your child is training with us we will from time to time take photographs of classes, facilities and equipment for our website, information and advertising purposes. We would therefore like to ask permission to take photos which may include ones of yourself/your child. Please delete as appropriate, then sign and date it at the bottom.

May we use photographs which include yourself/your child on the website and for advertising and information purposes? Yes / No

May we print names with photographs? Yes / No

May we record videos which will include yourself/your child for website and advertising purposes? Yes / No

Student Signature: Date: / /

Parent/Guardian Signature: Date: / /
(If the student is under 18)

When you have filled out this form with your details, please return it to your Instructor.