Registration Form 2009-2010

EXTRA-CURRICULAR LESSONS

The registration form should be returned to Tutti Frutti by mail, fax or be directly dropped off at the school 204, rue de la Victoire, 1060 Brussels.
Tel/fax: 02 538 37 43. E-mail: tutti-frutti@skynet.be

Last name and first name of the child: ……
Contact person: ……
Date of birth: ……
Street: ……No……Box:……
Post code: ……City: ……
Tel (home): ……GSM: ……
Tel (office): ……
Level: Beginner - Intermediate - Advanced
Is your child allergic to any food or medication?
If so, to which substances? ……
Has your child been vaccinated against tetanus? Yes – No
Date of last vaccination: ……
Other useful information: ……

I ……hereby consent to the A.S.B.L Tutti Frutti using my children's pictures. These will be meant to be posted on the site or any other publication of the A.S.B.L.

REGISTRATION
Language(s) ……
Day(s) and time of the week
…… ……

□ at Tutti Frutti
□ lessons at home
address: ……

Subscription			
□ annual 60 €	□ 1st term 25 €	□ 2nd term 25 €	□ 3rd term 25 €

Amount due for lessons (Info & Conditions 2009-2010)
1st term ……
2nd term……
3rd term ……

□ with after school pick-up; if so, address of school:
……end of the lessons ……
□ with « garderie » ……
□ extra-curricular activities : □ Danse & Folklore : …… □ Arts and Crafts workshop ……
□ « Movement Theater » (for 6 years old onwards) : ……..
□ trial class ……

TOTAL ……
□ Cash
□ Bank transfer – account number: **114-2575113-85** (in the communication, please mention the name of your child and the lessons he/she is registered for)
□ Annual payment
Before 10th September
□ Payment by term
Before 10th September, 10th January, 10th April

Person responsible for payment : ……
Date and Signature ……