

fusion academy



FUSION @ BODYWIZE APPLICATION FORM 15 Sessions starting Jan 30th – May 21st 2012

Please complete this form (one for each child) & fax it to: +852 2815 2278 or send it to the Head Office: Apt A, G/F, ShukYuen Building, 2 Green Lane, Happy Valley, Hong Kong.

LIMITED SPACES in each class

Name of Student: _____ Date of Birth: _____ Age: _____
Parent's Name: _____ Home No: _____ Mobile No: _____
Email: _____ School attending _____

CHEQUES MUST BE MADE PAYABLE TO FUSION ACADEMY LIMITED

Class Age Ranges – Tots: 2-4yrs; Juniors 4-8yrs; Ballet age 4-5 years and 5-6 years

Bodywise Happy Valley

- | | | |
|---|--------------------------------|-----------------|
| <input type="checkbox"/> Monday 2.30pm-3.15pm | Ballet 3-4 yrs | HK\$2700 |
| <input type="checkbox"/> Monday 3.15pm-4.00pm | Ballet 5-6 yrs | HK\$2700 |
| <input type="checkbox"/> Monday 4.00pm-5.30pm | Junior Fusion (4-7 yrs) | HK\$4200 |
| <input type="checkbox"/> Friday 2.30pm-3.30pm | Fusion Tots | HK\$3000 |

ESSENTIAL INFORMATION

Does your child have any allergies, dietary requirements, medical conditions that we should know about?

Please list the adults authorised to collect your child from school: Please note that we require all adults to sign their child in at the beginning of each session and sign their child out. Adults may be required to show ID.

EMERGENCY CONTACT

In the event of us not being able to contact you on the number detailed above, please provide the name of one emergency contact:

Name: _____

Telephone: _____

Relationship to student: _____

METHODS OF PAYMENT

1. By cheque payable to "FUSION ACADEMY LIMITED"
2. By electronic transfer to **HSBC 808 675342 838** with the student's name as reference

PHOTO/VIDEO RELEASE

I hereby give permission for images of my child, captured during Fusion Academy of Performing Arts events through video, photo and digital camera, to be used solely for the purposes of Fusion Academy Limited promotional material and publications, and waive any rights of compensation or ownership thereto.

Please tick YES if you agree to the above.

Please tick NO if you do not want Fusion to release any video or photo material of your child/ren.

YES NO

Parent/Guardian Signature: _____

Date: _____

Terms & Conditions:

The absence of a pupil does not lessen the cost of running the school and fees are not refundable if a pupil is unable to attend classes due to sickness, accident, quarantine or vacation.

In the event of withdrawal parents/guardians must provide a minimum of 30 days' notice of such intention in writing. Following this notice period, fees will be refunded pro rata to the actual time away from the school or classes.

Applicants will receive a 100% refund if cancellation occurs 14days prior to the commencement of term.

I agree to the terms and conditions of Fusion Academy Limited.

Parent/Guardian Signature: _____

Must be signed by the person responsible for the fee

Date: _____

PLEASE RETURN THIS FORM WITH YOUR PAYMENT

Mailing Address:

Fusion Academy Limited
Apt A, G/F, Shuk Yuen Building,
2, Green Lane, Happy Valley
Hong Kong

+852 2812 0007
info@fusionacademyhongkong.com
www.fusionacademyhongkong.com