



## Performing Arts Academy

### 2015 Enrolment Form

Corner Norwest Boulevard and Solent Circuit

Mail: PO Box 1195 CASTLE HILL NSW 1765

Phone: 8853-5246

Email: [hpaa@hillsong.com](mailto:hpaa@hillsong.com)

**Please complete this document (ONE FORM PER STUDENT) and email to [HPAA@hillsong.com](mailto:HPAA@hillsong.com)**

#### Student Information

SURNAME: \_\_\_\_\_

FIRST NAME: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

AGE IN JANURAY 2015: \_\_\_\_\_

YEAR AT SCHOOL: \_\_\_\_\_

NEW STUDENT COMMENCING IN 2015  / CURRENT STUDENT

PREVIOUS PERFORMING ARTS EXPERIENCE (PLEASE STATE): \_\_\_\_\_

#### Parent/Guardian Information

PRIMARY CONTACT NAME: \_\_\_\_\_

PRIMARY CONTACT PHONE (Mobile/Work/Home): \_\_\_\_\_

EMAIL (REQUIRED FOR INVOICES, LATEST INFORMATION, ETC): \_\_\_\_\_

RELATIONSHIP TO STUDENT: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

SECONDARY CONTACT NAME: \_\_\_\_\_

SECONDARY CONTACT PHONE (Mobile/Work/Home): \_\_\_\_\_

RELATIONSHIP TO STUDENT: \_\_\_\_\_

#### Enrolment information

GROUP LESSON

1. Class Name/Day/Time	2. Class Name/Day/Time
3. Class Name/Day/Time	4. Class Name/Day/Time
5. Class Name/Day/Time	6. Class Name/Day/Time

In the event of only one student arriving for participation in a group lesson the class will be cancelled. In this circumstance the student will be permitted to attend a make-up group lesson, appropriate to their age, in the same or following week.

## PRIVATE LESSON

Class Name (E.g. Vocal Private)	Day	Time	Instructor

ALL students undertaking a private lesson must have an accompanying adult (over 18 years of age) present during the entire lesson.

NAME OF ACCOMPANYING ADULT: \_\_\_\_\_

RELATIONSHIP TO STUDENT: \_\_\_\_\_

If the accompanying adult is not present at the time of the lesson, the private lesson will not be held. Depending on instructor availability, a make-up lesson (at which time the adult must be present) may be arranged by emailing [hpa@hillsong.com](mailto:hpa@hillsong.com).

### The following information is for statistical purposes only

HOW DID YOU HEAR ABOUT US (PLEASE STATE): \_\_\_\_\_

DO YOU ATTEND HILLSONG CHURCH: YES  / NO

### TERMS AND CONDITIONS OF ENROLMENT

#### **LIABILITY WAIVER**

I, (parent/guardian of the said child), hereby acknowledge and accept that whilst every reasonable precaution will be taken by Hillsong Performing Arts Academy, its instructors and volunteers ('HPAA'), to ensure the good welfare of and protection of all children who register and attend Hillsong Performing Arts Academy. HPAA is not responsible for any accident and/or injury that may be suffered by any child or person attending classes and I hereby release waive, discharge, and covenant not to sue HPAA or its Agents, Employees, Directors, Officers, Volunteers and/or assignees, to the fullest extent permitted by law, from any and all liability, claims, demands, actions and causes of action whatsoever arising out of or related to any loss, damage, or injury, that may be sustained by me, or to any property belonging to me, while participating in the lessons.

#### **PROPERTY LOSS OR DAMAGE**

I, (parent/guardian of the said child), hereby acknowledge and accept that whilst every reasonable precaution will be taken by HPAA, its instructors and volunteers, HPAA is not responsible for any loss or damage to property of said child that may occur whilst on the premises.

#### **MEDICAL CONDITIONS/MEDICAL TREATMENT CONSENT**

ARE THERE ANY MEDICAL CONDITIONS/ALLERGIES THAT WE SHOULD BE MADE AWARE OF (If yes please provide a detailed description): \_\_\_\_\_

I, (parent/guardian of the said child), hereby give permission to Hillsong Performing Arts Academy Instructors and Volunteers ('HPAA') to request treatment for my child in the event of an emergency. I understand that every effort will be made to contact me before instituting such procedures. I agree to pay all medical costs such as doctor, ambulance and hospital fees incurred on behalf of my child. I agree that HPAA will not be held liable for any medical treatment and medical condition in connection with my child.

#### **PERMISSION TO BE PHOTOGRAPHED OR FILMED**

I, (parent/guardian of the said child), give my permission for my child to be photographed or videotaped in connection with Hillsong Performing Arts Academy. I understand that the image may be used for advertising, promotional material, or website. I understand that as a precaution my child's name will not be published or linked with photographs.

#### **FEES**

I (parent/guardian of the said child), understand that fees must be paid within seven days of receiving an invoice. If fees are not paid, I understand and accept that there will be a temporary hold placed on my child's classes until fees are paid in full. No refunds will be given for absences for any class. This includes sickness, other commitments and holidays taken

during term. I acknowledge that the option of discontinuing class mid-term is not available. Should I wish to discontinue class/es, I will notify the office during the term and it will take effect at the completion of that term. I understand and acknowledge that no refunds or credit notes will be applied in the event of students not completing their term of study.

#### **PRIVACY POLICY & CHILD PROTECTION POLICY**

I (parent/guardian of the said child), understand that HPAA complies with the Privacy Policy and Child Protection Policy of Hillsong Church Ltd. I understand and acknowledge I can access the Privacy Policy at <http://hillsong.com/policies>, and the statement on the Child Protection Policy at <http://hillsong.com/policies>.

#### **DRESS STANDARD**

I (parent/guardian of the said child), acknowledge that my child is required to wear the HPAA uniform. I understand that this helps HPAA to ensure safe dance practices and that a hard copy of the HPAA uniform requirements is available in the HPAA Office and can be emailed upon request. I the Parent/Guardian agrees to ensure students are always neatly and modestly presented when coming to and from the HPAA classroom, especially in public places.

#### **PICK UP/DROP OFF OF CHILDREN and PARENT WAITING AREA**

I (parent/guardian of the said child), agrees to deliver the student directly to his/her instructor in time for the scheduled lesson commencement time. I the Parent/Guardian recognise that it is my responsibility to pick up my child/children on time and acknowledge that HPAA is unable to release a student without the student being personally collected by the Parent/Guardian.

I (parent/guardian of the said child), agree to contact Hillsong Church reception (02) 8853 5353 and request them to transfer the call to the dance studio so that the teacher can be informed that I am running late or have been inadvertently delayed. I (parent/guardian of the said child) acknowledge that, there is a designated waiting area adjacent to the studio should I choose to wait for my child for the duration of the lesson.

#### **OPEN WEEK**

I (parent/guardian of the said child), acknowledge that classes typically run better without parents in the studio and that throughout the last week of terms one and two, HPAA holds "open weeks" where I will be invited, as a parent/guardians to come and view my child's lesson/s and see their progress.

#### **ANNUAL PRODUCTION**

I, (parent/guardian of the said child), understand that as part of the HPAA annual production, my child will participate in one extra Saturday rehearsal prior to the concert as well as the Saturday of the concert itself. I understand that fees for costumes are not included in term fees and will be invoiced separately prior to the commencement of the concert. I understand and acknowledge that if my child is absent from too many classes and/or rehearsals, they may have to be excluded from the performance.

#### **ACKNOWLEDGEMENT**

I, (parent/guardian of the said child), confirm that I have read and understood the aforementioned terms and conditions of enrolment and accept them. I, (parent/guardian of the said child), understand that, failure to adhere to the terms and conditions of this agreement could cause termination of my child's involvement in Hillsong Performing Arts Academy.

**Parent/Guardian name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## Important Information

### AGE GUIDE:

Tiny Tots: 3 y/o – 6 y/o	Junior: 7 y/o – 10 y/o
Pre-Teen/Teen: 11 y/o – 15 y/o	Senior: 16+

**\*Please note: This is a guide. Students will be allocated to class groups specific to their ability rather than their age/year at school.**

### TERM DATES:

Term 1	Wednesday 11 <sup>th</sup> February – Thursday 2 <sup>nd</sup> April (8 Weeks)
Term 2	Monday 20 <sup>th</sup> April – Friday 26 <sup>th</sup> June (10 Weeks)
Term 3	Monday 13 <sup>th</sup> July – Friday 18 <sup>th</sup> September (10 Weeks)
Term 4	Tuesday 6 <sup>th</sup> October – Friday 11 <sup>th</sup> December (10 Weeks)

### IMPORTANT DATES:

**Saturday 7<sup>th</sup> November** – Dress Rehearsal 1 (compulsory for participation in annual performance)

**Saturday 21<sup>st</sup> November** – Dress Rehearsal 2 and Annual Performance

### PRICES (PER TEN WEEK TERM):

Per 45 Minute Class	\$125
Per 1 Hour Class	\$150
Per 1.5 Hour Class	\$200
30 Minute Private (Dance/Vocals)	\$300
1 Hour Private (Dance/Vocals)	\$600

The option of discontinuing class mid-term is not available. Should you wish to discontinue class, please notify the office during the term and it will take effect at the completion of that term. No refunds or credit notes will be applied in the event of students not completing their term of study.

**Absences:** No refunds will be given for absences for any class. This includes sickness, other commitments and holidays taken during term.

### PAYMENT METHODS:

We do not process cash, however you may utilise the following methods of payment:

- **Direct Deposit: (Preferred)**  
Hillsong Media and Performing Arts Incorporated  
National Australia Bank  
BSB: 082 135  
A/C: 55000 5922  
(Ensure your reference clearly identifies you: Student Name, Class, etc)  
Please confirm remittance via email: [hpaa@hillsong.com](mailto:hpaa@hillsong.com) ;
- **Cheque:** Please make cheques payable to “Hillsong Media and Performing Arts Incorporated”, making sure that the “Student Name” and “Invoice number” is on the back of cheque;
- **Credit Card:** Payment details on invoice (VISA/MasterCard/AMEX)

## 2015 Timetable

	Class	Day/Time	Location
<b>Tiny Tots</b> <b>(3-6y/o)</b>	Jazz/Ballet/Tap Combo (3-4y/o)	Tuesday 3:45-4:30	Dance Studio 1
	Ballet Primary (Min. examination age 6y/o) + Stretch and Technique	Tuesday 4:30-5:30	Dance Studio 1
	Jazz/Tap Combo (5-6y/o)	Tuesday 3:45-4:30	Dance Studio 2
<b>Junior</b> <b>(7-10y/o)</b>	Ballet Grade 2 (Minimum examination age 7y/o)	Tuesday 5:30-6:30	Dance Studio 2
	Ballet Grade 3 (Minimum examination age 8y/o)	Wednesday 4:30-5:30	Dance Studio 1
	Ballet Grade 4 (Recommended examination age 9y/o+)	TBC - Wednesday 5:30-6:30	TBC - Dance Studio 1
	Junior Jazz/Tap	Tuesday 4:30-5:30	Dance Studio 2
	*Junior Hip Hop (Girls)	Thursday 5:15-6:00	Dance Studio 1
	*Junior Hip Hop (Boys)	Thursday 5:15-6:00	Dance Studio 2
	Junior Acrobatics	Thursday 4:30-5:15	Dance Studio 2
Junior Contemporary	Thursday 3:45-4:30	Dance Studio 2	
<b>Pre-Teen/Teen</b> <b>(11- 15y/o)</b>	Ballet Grade 5 (a) (Minimum examination age 11y/o)	Tuesday 5:30-6:30	Dance Studio 1
	Ballet Grade 5 (b) (Examination Class)	Wednesday 6:30-7:30	Dance Studio 1
	Ballet Intermediate (Minimum examination age 12 y/o)	Tuesday 6:30-7:30	Dance Studio 1
	Ballet Intermediate (Pointe)	Wednesday 4:00-5:30	Dance Studio 2
	Pre-Teen/Teen Jazz	Tuesday 7:30-8:30	Dance Studio 2
	Pre-Teen/Teen Contemporary	Tuesday 6:30-7:30	Dance Studio 2
	*Pre-Teen/Teen Hip-Hop (Girls)	Thursday 5:15-6:00	Dance Studio 1
	*Pre-Teen/Teen Hip Hop (Boys)	Thursday 5:15-6:00	Dance Studio 2
	Pre-Teen/Teen Acrobatics	Thursday 6:00-7:00	Dance Studio 2
<b>Senior</b> <b>(16+)</b>	Ballet Adv. Foundation (Min. examination age 13 y/o)	Tuesday 7:30-9:00	Dance Studio 1
	Ballet Advanced Foundation (b) (Examination Class)	Wednesday 7:30-9:00	Dance Studio 1
	Senior Jazz	Wednesday 5:30-6:30	Dance Studio 2
	Senior Tap	TBC - Wednesday 7:30-9:00	TBC - Dance Studio 2
	Senior Contemporary	Wednesday 6:30-7:30	Dance Studio 2

**OFFICE USE ONLY** Trial: Yes/No. Date of Trial: \_\_/\_\_/2015.  
Enrolled: Yes/No. Date of Enrolment: \_\_/\_\_/2015.