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# 2010 Workshop Enrolment Form

**PLEASE FILL IN ALL SECTIONS OF THIS FORM  
& RETURN TO URBAN MYTH AS SOON AS POSSIBLE!**

## PARTICIPANT DETAILS

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Suburb: \_\_\_\_\_  
P/Code: \_\_\_\_\_ AGE: \_\_\_\_\_  
Home: \_\_\_\_\_  
Work: \_\_\_\_\_  
Mobile: \_\_\_\_\_  
Email: \_\_\_\_\_  
School: \_\_\_\_\_

## PARENT CONTACT DETAILS

(in case of emergency)

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Suburb: \_\_\_\_\_  
P/Code: \_\_\_\_\_  
Home: \_\_\_\_\_  
Work: \_\_\_\_\_  
Mobile: \_\_\_\_\_  
Email: \_\_\_\_\_

**Please turn over!**

## WORKSHOP DETAILS

Workshop: \_\_\_\_\_  
Day/Time: \_\_\_\_\_  
Tutor: \_\_\_\_\_

Workshop: \_\_\_\_\_  
Day/Time: \_\_\_\_\_  
Tutor: \_\_\_\_\_

## PAYMENT DETAILS

Please ensure that you have returned your payment details with this form. **All payments** will be required by the commencement of the first class. *If you are unable to pay in a full amount, please speak with the General Manager to create a payment plan.* See over page for direct deposit details.

**Early Bird\***: \$125 full / \$100 conc  
**Regular**: \$145 full / \$120 conc

Payments can be made by cash, cheque (*made out to Urban Myth Theatre of Youth Inc.*), Money Order or by Credit Card (*a \$5 processing fee will be charged if paying by credit and credit transactions can only be done in person.*)

**Urban Myth's Direct Deposit Bank Details:**

Account #: 073 298 940

Name: Urban Myth Theatre of Youth Inc.

BSB: 105 011

Branch: BANK SA Unley

*Make sure you put your child's/members name as the reference so we can identify the payment*

I would like to volunteer with Urban Myth

YES

NO

If yes, what areas can you volunteer in?

\_\_\_\_\_

**HEALTH HISTORY**

Please describe any health conditions that you/your child may have that may have an affect on your/their time with Urban Myth. (eg. Asthma, Learning Difficulties, Disabilities, etc.)

\_\_\_\_\_

Does your child/you have any allergies?  YES  NO

If yes, what? \_\_\_\_\_

Are there any special instructions in regards to treating, in case of an emergency?

\_\_\_\_\_

\_\_\_\_\_

Any other information regarding your/your child's health? \_\_\_\_\_

\_\_\_\_\_

**TERMS AND CONDITIONS**

- Enrolment is essential to guarantee a place in a workshop.
- Enrolment is essential to meet our duty of care obligations.
- **Payment is required BEFORE commencement of the first class.**
- Receipts are available upon payment from the office or via post.
- Workshop prices are GST inclusive.
- Precedence is given to those who enrol and pay first.
- Enrolment fees are non-refundable once term has started.
- Non-completion of course still incurs full fees.
- Workshops may be cancelled if minimum numbers are not met.
- Concessions are available to holders of Health Care cards.
- 10% discount is given to the 2<sup>nd</sup> family member who enrolls in the same term.
- 10% discount is given if one member undertakes a 2nd workshop in the same term.
- Please notify us if you are running late or unable to attend a workshop.
- Please arrive and depart promptly. If members are not picked up within 15minutes of a class finishing, you will be charged \$40 an hour, or part there of, to cover tutor's time.

**SUBJECT PERMISSION**

I agree that Urban Myth Theatre of Youth uses images / video of my child/me for the purpose of use in any Urban Myth publications (all media, including internet), exhibitions, marketing, publicity and documentation. I understand that this may include my child's/my name, the place and date the image was made being published without compensation to my child/me.

I understand the terms and conditions, the subject permission and agree to comply.

\* Signed: \_\_\_\_\_ Date: \_\_\_\_\_

(The Member, or if under 18-parent/legal guardians)