



**MARK JERMIN STAGE SCHOOL ENTRY AND REGISTRATION FORM**

PLEASE FILL OUT IN BLOCK CAPITALS AND PLEASE RETURN TWO PASSPORT PHOTOS WITH THIS FORM

**FULL NAME:** .....

**D.O.B:** ..... **AGE:** .....

**LANGUAGES SPOKEN FLUENTLY:** .....

**ETHNIC ORIGIN:** .....

**FULL NAME OF PARENT/GUARDIAN:** .....

**ADDRESS:** .....

.....

..... **POSTCODE:** .....

**HOME TELEPHONE:** .....

**WORK CONTACT NUMBERS:** .....

**MOBILE:** .....

**E-MAIL ADDRESS:** .....

**ANY BROTHERS/SISTERS AND THEIR AGES:** .....

**SCHOOL/COLLEGE ADDRESS:** .....

.....

**EDUCATION AUTHORITY:** .....

**NAME OF FAMILY DOCTOR:** .....

**Does your child suffer from any health problems?** .....

.....

**STAGE SCHOOL:** ..... **CLASS:** .....

-If any student gains professional work via Mark Jermin Management or stage school contacts, commission will be deducted at the rate of 20% from the earnings including all chaperone fees.

-I fully understand that my son/daughter is under exclusive contract for any professional work for one year from the date signed below.

-On behalf of the above student I fully acknowledge that The Mark Jermin Stage School, its members and agents will not be liable for loss or damage to personal belongings during the course of training.

-Mark Jermin uniform is available from the Stage School. Yellow MJ sweatshirts & black bottoms are preferred. Soft jazz shoes or trainers must be worn.

-I hereby agree to the above, to pay all fees in advance and understand that no reimbursements or reductions for absence from classes are offered in any circumstances

**SIGNATURE:** ..... **DATE:** .....