



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?

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-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:**