

West one school of performing arts
Application Form
For children 6-16 years

Student Details

Name..... Age/ D.O.B.....
Address.....
.....
.....Postcode.....
Telephone.....
Gender.....

Please give details of any medical conditions or allergies we should be made aware of.....
.....

GP Name..... GP Number.....

Parent Details

Name.....
Address.....
.....
.....Post code.....
Home Number..... Mobile.....
Email Address.....

Alternative contact:

Name..... Number.....

Declaration by parents

I..... being the parent/guardian of
Declare that the information given in this application is correct and hereby apply for a place at The West One Performing Arts School.

I enclose my Cheque payable to **Faye Quinney** for the sum of:
Option1: £50 deposit (£200 payable on the first day of term)
Option 2: Full balance of £250.

I agree to half a terms notice in writing mid-term of my Childs intention to leave West One at the end of that term or to pay half a terms fee in lieu of notice.

Signed.....Date.....

West One Performing Arts
18 Aileen Walk, Stratford, London, E15 4BB
Telephone: 02085554574 or 07513010586
Email: performingarts@west-1.net
www.west-1.net.