



Mackenzie Therapy



Holiday Program/Mackenzie Performing Arts Academy Enrolment form

Parents Email address: _____

Student/s Name: _____

DOB: _____

Age: _____

Parents: _____

Town/City of Residence: _____

Contact number: _____

Any Allergies & if so what? _____

Do you give your child/ren permission to walk home on their own? _____

Who is allowed to pick your child/ren up?

Any previous drama/singing experience (e.g. lessons, exams, competitions, productions)? if so what?

What would you like your child/ren to get out of this program?

If you are enrolling into the MPA Academy please indicate which strand/group:

Drama

Musical Theatre (8-18years: \$220 term)_____

Preschoolers (3-4years: \$85 term)_____

Juniors (5-7 years: \$110 term)_____

Intermediates (8-11years: \$165 term)_____

Seniors (12-18years \$220 term)_____

Singing 1:1: (\$50 per lesson)_____

Do you have a preference over which day?

Twizel: Monday_____ Wednesday_____

Fairlie: Tuesday_____ Thursday_____

Are you enrolling more than one child? If so how many? (2 or more family members in the academy receive a 10% discount)_____

Have you enrolled your child/ren across multiple strands in the academy? If so then you will receive a 10% academy discount *(not able to be used on top of the family discount. Only one lot of discount is able to be used at one time).* _____

If you have enrolled for a holiday program would you like to know more about or enrol into the Mackenzie Performing Arts Academy Drama/Musical Theatre group classes or 1:1 singing classes? If yes we will send you an email with details.

Facebook agree *(Do not post images on Facebook, Post images without names, post images with names):* _____

Agree: *(I agree/do not agree to the terms and conditions of enrolling my child in Mackenzie Therapy Ltd' Holiday Program.)*

If you have any questions about any information on this enrolment form, please touch base via phone or email.

Please email this form back to:

admin@mackenzietherapy.co.nz