

BOOKING FORM



INDIVIDUAL SPEECH & DRAMA LESSONS

Yrs 2 - 8

(Please return to the Office)

Full Name of Child: _____

Year: _____ Tuition Start Date: _____
(Autumn/Spring/Summer Term)

- Request for 15 minute lessons in early stages
- Individual lesson Shared lesson with _____
- Mrs Cutler (Years 5-8) Mrs Gill (Years 2-8)

Please enrol the above named child for individual speech and drama lessons as indicated.

I understand that a full half term's notice, in writing, must be given to terminate this arrangement.

I understand that I will be invoiced in advance for lessons and the charge will appear on the termly invoice in the usual way.

Signed: _____ **Date:** _____

Print Name: _____

Contact Telephone _____