

**MARGIE WELLS DANCEXCHANGE
ENROLMENT CONTRACT**

271 BEYERS NAUDE DRIVE
BLACKHEATH
2195

P.O. BOX 48478
ROOSEVELT PARK
2129

TEL: 476-8363 / FAX: 476-3648

COMPLETE THE FOLLOWING AND RETAIN A COPY FOR YOUR RECORDS

FULL NAME OF PUPIL :-

HOME ADDRESS :-

..... CODE: EMAIL:

TEL (H) (W) (CELL) (F)

ADDRESS TO WHICH ACCOUNTS MUST BE SENT :

..... CODE :

PERSON RESPONSIBLE FOR ACCOUNT : ID NO:

PUPILS DATE OF BIRTH : ENROLMENT DATE :

****** PLEASE NOTE THE FOLLOWING TERMS & CONDITIONS ******

1. A Full Terms Registration Fee will be charged. This amount will be credited to your account in your last term of dancing **only upon correct receipt of Termination of the Contract**
2. The year is divided into 4 (four) terms, as per the Gauteng Government School Terms.
3. The Studio is closed during **all** school and Public Holidays.
4. Fees are payable in **advance** at the first lesson of each new term. No refunds
5. The Studio reserves the right to refuse to teach a pupil should the account be outstanding.
6. A Registration Fee renewal **will** be invoiced at the beginning of each year.
7. This contract expires **ONLY** upon receipt of **WRITTEN NOTIFICATION, given before the end of the term prior to your last term of dancing. E.g. If you are leaving at the end of Term 2, written notice must be given before the end of Term 1. Failing which, a full term's fee will be charged and your Registration Fee will be used to cover this cost. Please ensure that your "Notice Letter" has been received timeously by the Studio to avoid any disputes regarding your registration fee.**
8. **Note: A terms notice is also required when terminating any dance class!**
9. Dancexchange does not accept any liability for any direct or indirect damages arising whatsoever. Dancexchange does not accept responsibility for any loss or damages to any possessions brought to the Studio.

I agree that I have read the above conditions and fully understand the terms as set out.

SIGNATURE: (State Parent / guardian / self (over 21)) :

For Studio Use only: Staff Member: Acc No:

Commencement Date: Grade:

Receipt No: Amount Reg Fee: Term Fee:

MARGIE WELLS
A.I.D.T Associate Teacher
A.I.D.T Board Member

The Dancexchange
FNB Northcliff
Branch:- 253705
Account:- 504 000 101 83