



# Olé Club Español

Ven a charlar!

## Children's Enrolment Form

### Student's Information

Child's Name	<input type="text"/>
Gender	<input type="text"/>
D.O.B	<input type="text"/>
Parent's Name	<input type="text"/>
Address	<input type="text"/>
Post Code	<input type="text"/>
Tel.number	<input type="text"/>

### Program Information

4-6 Years Old	Date:	Time:	Centre:	
7-9 Years Old	Date:	Time:	Centre:	
9-11 Years Old	Date:	Time:	Centre:	
Session	<input type="checkbox"/> Winter	<input type="checkbox"/> Autumn	<input type="checkbox"/> Spring	<input type="checkbox"/> Summer

### Method of Payment

Cheque / Cash  Bank Transfer  Credit/Debit Card  Standing Order

Please give us any other relevant information

I read and understood all the terms and conditions

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date