

# 2024

## Mini Elite Generation Extension Program Agreement



I wish to enroll my child/children listed below in the MINI Elite Generation Extension Program for 2024.

### MINI ELITE GENERATION EXTENSION PROGRAM ENROLMENT DETAILS

| STUDENT NAME /<br>DATE OF BIRTH | 2 DAY PROGRAM<br>MON / SAT<br>\$1200 | TROUPE MEMBER<br>2024<br>\$1300 | SOLOIST<br>2024<br>\$1400    | (For office<br>Use Only)<br>PRICE PER TERM |
|---------------------------------|--------------------------------------|---------------------------------|------------------------------|--|
| Name:                           | Included                             | <input type="checkbox"/> Yes    | <input type="checkbox"/> Yes |  |
| DOB:                            |                                      | <input type="checkbox"/> No     | <input type="checkbox"/> No  |  |
| Name:                           | Included                             | <input type="checkbox"/> Yes    | <input type="checkbox"/> Yes |  |
| DOB:                            |                                      | <input type="checkbox"/> No     | <input type="checkbox"/> No  |  |

### ANY ADDITIONAL TIMETABLED CLASSES TO BE ENROLLED AT STANDARD TIMETABLE RATES

| CLASS | DAY | TIME |
|-------|-----|------|
|       |     |      |
|       |     |      |
|       |     |      |
|       |     |      |
|       |     |      |
|       |     |      |

- I hereby agree and understand that enrolment in the MINI Elite Generation Extension Program is for a 12 month period with full year of fees payable.
- I hereby agree that a \$40 registration/enrolment fee is payable and will be charged to the Payrix direct debit system upon enrolment.
- I acknowledge that I have received, read, understand and accept the terms and conditions which apply to the enrolment in the Elite Generation Extension Program.

I would like to enter arrangements for payment by the Payrix direct debit system for Fees on the following basis (tick your preference)

- 52 x **Weekly** Payments Commencing first business day of January 2024
- 26 x **Fortnightly** Payments Commencing first business day of January 2024
- 12 x **Monthly** Payments debited on 15th of each month commencing 15th January 2024
- 4 x **Quarterly** Payments debited on 15th of each month in January, April, July and October 2024

Parent / Guardian Name \_\_\_\_\_

Address \_\_\_\_\_ Suburb \_\_\_\_\_ Postcode \_\_\_\_\_

Mobile \_\_\_\_\_ Email \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

(If you are unable to insert an electronic signature you may still return this form by email to register enrolment. As a follow up, if no signature appears on your emailed form please print, sign and return a copy to the studio asap).

**Principal & Director** Belinda Payne (S.F.D)  
**Office Phone** 0412 082 804  
**Email** [info@nextgendancestudio.com.au](mailto:info@nextgendancestudio.com.au)  
**Web** [www.nextgendancestudio.com.au](http://www.nextgendancestudio.com.au)  
**Studio Address** Rear of Goodlife Health Club,  
141 Mountain Hwy, Wantirna Vic 3152

**Next Generation Dance Studio** is an affiliated Ready Set Dance studio offering these classes under the Ready Set Dance syllabus  
**Next Generation Dance Studio** is an affiliated Acro Dance Teachers Association (ADTA) studio offering safe classes in Acrobatics through a comprehensive syllabus.