

# LONDON MUSIC SCHOOL

ENROLMENT FORM:

Tel: +44 (0) 845 299 0872

(PLEASE USE CAPITALS)

Please print form, fill in and post or email to us:

[jo@londonmusicschool.com](mailto:jo@londonmusicschool.com)

NAME OF COURSE: \_\_\_\_\_ COURSE START DATE: \_\_\_\_\_

SURNAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

POST CODE: \_\_\_\_\_ HOME TEL: \_\_\_\_\_ EMAIL \_\_\_\_\_

OCCUPATION: \_\_\_\_\_ MOBILE: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ MALE  FEMALE

(please tick) Please indicate which course you require:

Full Time One Year Course  Summer Course

Full Time Six Month Course

Part Time Evening Course

Part Time Saturday Course

Audio Technology

Drum Performance

Sound Engineering

Guitar Performance

Saxophone Performance

Bass Performance

Vocal Performance

Keyboard Performance

Please tick payment method: Bank transfer  Cheque  Credit/Debit Card

\* (extra charges may be added when paying by card)

Credit /Debit Card No : \_\_\_\_\_

Card Type: \_\_\_\_\_ Start Date: : \_\_\_\_\_ Expiry Date: \_\_\_\_\_

Issue No: (switch only) \_\_\_\_\_ Security No \_\_\_\_\_

Name of Card Holder: \_\_\_\_\_

Address of Card Holder: \_\_\_\_\_

I authorise you to debit my Credit /Debit Card account with the sum of

£ \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_ Places on any course cannot be guaranteed until the balance of fees has been submitted.

## REFUND POLICY

Owing to the limited number of places on all courses the school is unable to offer refunds after the course has commenced. In exceptional circumstances, a leave of absence may be granted; such permission is granted at the discretion of the management of London Music School.

## CANCELLATION

In the case of cancellation, the registration fee is non-refundable.

## PAYMENT OF FEES

The balance of fees for the Six-Month Course is payable six weeks prior to the start date. If for any reason it is not possible to make payment by this date,

the school must be notified immediately as places cannot be guaranteed until full payment is received. London Music School reserves the right to adjust or modify any information on this form as the need arises.

I have read and understood the terms and conditions included in the school prospectus and the school's policy with regard to refunds and cancellations

.Signed: \_\_\_\_\_ Date: \_\_\_\_\_

London Music School, 9-13 Osborn Street, London, E1 6TD, England.