

Gippsland Children's Choir

Enrolment Form 2024



Student Name: _____

Student Age: _____

School Attending: _____

Parent Name: _____

Address: _____

Email address: _____

Mobile: _____

Children enrolled in GCC are required to attend weekly rehearsals at their chosen venue.
Please tick below which venue you will be attending:

- | | |
|--|------------------|
| <input type="checkbox"/> Moe/Newborough - Community Hub High Street, Moe | Tuesday 5 - 6pm |
| <input type="checkbox"/> Traralgon Neighbourhood House, Breed Street | Thursday 4 - 5pm |

Term Fees will be invoiced via email at the beginning of each term and required to be paid in advance. The fees are set at \$12 per rehearsal session. Fees are to be paid into the following account using your child's last name and venue (Moe/Traralgon) as a reference. Once enrolment forms are received you will be **emailed** an invoice for payment.

Account Name: Gippsland Children's Choir

BSB: 313-140

Account Number: 12430780

All children in GCC are required to purchase the GCC T-Shirt. Please indicate your child's size below. All shirts are \$25 and must be worn for performances. This will be added to your term invoice.

Size 4

Size 6

Size 8

Size 10

Size 12

Size 14

Size 16

Size 18

Please detail any previous singing or choir experience that your child has, preferred range, current singing teacher (if any).

At times, GCC will use photos for promotional use on social media and local advertising, including Facebook, Latrobe Valley Express and Instagram. Please sign below to acknowledge your acceptance.

Name: _____ Signature: _____

Date: _____

All information will be updated regularly on our Facebook page "Gippsland Children's Choir" as well as via email. Please ensure that you are following us on our Facebook page to receive these updates.

GCC singers are expected to participate in weekly rehearsals and set performances. It is important that families understand the commitment to these times and support their children in being available when required. Any absences will be credited to the following term upon provision of a medical certificate.

By signing below, you are acknowledging the attendance requirement, and the responsibility of fee payment for your child's involvement.

Parent Name: _____

Parent Signature: _____

Date: _____

Gippsland Children's Choir

Medical Information



Student Name: _____

Parent Name: _____

Address: _____

Email address: _____

Mobile: _____

Please tick below the venue which your child attends rehearsals on a weekly basis:

☐ Moe/Newborough

☐ Traralgon

Please list any medical concerns relating to your child:

Please list any regular medication that GCC need to be aware of in case of emergency:

Do you have ambulance cover? Yes/No (Please Circle)

If relevant, please detail any further information GCC should know about your child.

In case of emergency please sign below to give GCC permission to call an ambulance on behalf of your child.

Parent Name: _____ Date: _____

Parent Signature: _____