



Ciao Bella
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Australia
ABN: 95895921062

Lucia Ossola
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Enrolment Form

Mr., Mrs., Ms.

Name:

First

Last

Address: _____

Town: _____ Postal/zip code: _____

Telephone: _____ Mobile: _____

E-mail: _____

How did you hear about us?

Facebook Google Flyer Other: _____

I would like to enrol in the following class:

Mon Tue Wed Thu Fri Sat (circle the day please)

Time: _____ Level: _____

NON-REFUNDABLE Class Deposit: **\$50.00**

Please circle the preferable Payment Option:

1. By direct transfer to: Lucia Ossola, BSB: 062 692, Account number: 3620 3666
2. By cash or cheque (made out to Lucia Ossola) in person at Ciao Bella.

PLEASE WRITE YOUR FULL NAME AS YOUR REFERENCE.

To confirm this enrolment please sign to accept the terms and conditions.

Refund Policy: A student is entitled to a full refund of the deposit where a course is cancelled or re-scheduled to a time unsuitable to the student.

Signed: _____ **Date:** _____