

Instrumental Music

Cancellation of Enrolment

Student's Name _____ Year Level _____ House _____

Parent's Name _____ Phone Number _____

Music Tutor's Name _____

Cancel Lessons on (instrument) _____

**STUDENTS MUST REMAIN IN THE PROGRAM
FOR AT LEAST ONE TERM**

Please Note: Cancellations will be processed at the end of the term. Mid term cancellations will not be accepted and the full terms fees will be due.

Parents Signature: _____ Date: _____

Please complete and return this form to:

Mrs Jennifer Hutchinson
Executive Officer Music
Marist College Ashgrove
PO Box 82 Ashgrove QLD 4060
musicstaff@marash.qld.edu.au

Office use only. Doc 07/10

Received at Music Centre: _____ Cancellation effective end term: _____

Signed: _____