

# **ziva modelling**

ABN 96 307 250 833

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[www.zivamodelling.com.au](http://www.zivamodelling.com.au)

## ENROLLMENT FORM

Student's Name

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Date of Birth

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Postal Address

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Contact Phone number

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Parent/Guardian's name

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Any Special Needs?

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How did you hear about us?

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Preferred Class  
(please circle)

Life Skills  
Programme

Modelling

Advanced  
Modelling

Registration Fee\* - \$200.00 (Registration fee includes Ziva Modelling shirt and bag. This is a once off payment and does not need to be paid each year.)

Courses run for the duration of the school year. Terms are 10 weeks terms. Lesson prices are \$18 per lesson, or if the Term is paid up front it costs only \$150.00 per term (\$15 per class). There are no refunds. There is an end of year parade that the students will all have the opportunity to participate in. Please return this form by:

**By email:**        **[info@zivamodelling.com.au](mailto:info@zivamodelling.com.au)**

**or**

**By post:**        **670 Rockvale Road, Armidale NSW 2350.**

You can find contact details at **[www.zivamodelling.com.au](http://www.zivamodelling.com.au)** on the CONTACT US page.

A Ziva Team member will be in touch with you soon to confirm your enrolment and payment options. \*Registration is only complete once the Registration Fee is paid and both pages 1 and 2 of this form are completed.

We look forward to revealing the best version of YOU!

I acknowledge and agree that, in consideration of Ziva Modelling (“Ziva”) allowing me to attend classes and participate in other activities (“Activities”) as organised by Ziva I agree as follows:-

1. I agree to be bound by any rules and regulations that Ziva issues regarding the conduct of Activities organised by Ziva.
2. To release Ziva from all liability for any claim or demand or damage or personal injury or illness sustained by myself;
  - a. arising from or in respect of participation in the Activities (Ziva related or otherwise) arranged by or on behalf of Ziva, whether or not the injury is caused by Ziva or any other person participating in the Activities or on the premises;
  - b. whether or not the damage, personal injury or illness arises from the negligence or breach of any statutory duty of Ziva or any other person or activity.
3. I agree to obey Ziva at all times and acknowledge that my participation with Ziva or any other activity provided by Ziva may be terminated at any time by the Ziva.
4. I am responsible for any damage which I may cause to Ziva or the premises, if such damage is caused by wilful acts or negligence.
5. I confirm that I do not have any injury or illness that could be aggravated by my participation in Ziva or other activities and I acknowledge that Ziva is relying on this statement in allowing me to participate with Ziva. If I suffer from any such illness or injury I agree to notify Ziva immediately.
6. I acknowledge that:-
  - a. In participation with Ziva or other activity some physical contact may occur between myself and Ziva or myself and other students of Ziva; and
  - b. I consent to that contact being made; and
  - c. I will not hold Ziva or any other student of Ziva responsible for any injury or illness I may suffer in respect of that contact.
7. I acknowledge that the Ziva is not liable for any claim or demand or damage or personal injury or illness sustained by me as a result of any social function in which I may choose to participate, even if the event is arranged, organised or directed by Ziva, its Directors or members or clients or any third party.
8. I am aware that I require a copy of this Disclaimer.
9. I certify that all information provided by me to Ziva is true and correct. I confirm that I am over the age of eighteen (18) years and have read and understood the terms of this agreement before signing. Or, I am under the age of eighteen (18) years I have obtained permission to participate in the classes from my parent / guardian and will have them sign on my behalf before participating in any Activity.
10. I hereby acknowledge that at Ziva, events and functions Ziva may record any event or activity by any means or format and use such recordings (including but not limited to photo and video) for whatever purpose and without obligation to me.

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Name of Student

Date

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Signature of Student  
(or if Student is under 18 years of age  
signature of parent/guardian)

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Name of Parent/Guardian