

PETER SARDI'S SCHOOL OF ACTING

DEPOSIT PAYMENT FORM

To secure a place print out this form, sign & forward with payment to mailing address below.

TOTAL COST: **\$650.00** Per 9 Week Term **Deposit: \$220.00** Balance: \$430.00

Name.....

Address.....

Suburb.....P/Code.....

Mobile:.....(H).....

EMAIL.....

Please find enclosed my DEPOSIT of \$220.00

I understand my payments are STRICTLY non refundable & non transferable.

Signature.....

CHEQUES PAYABLE TO: "Peter Sardi's SCHOOL OF ACTING"

MAILING ADDRESS: Peter Sardi's School Of Acting **P.O.BOX 147 BRIAR HILL 3088**

TO SELECT A CLASS: Please circle CODE: A, B, C or D and circle TERM 1, 2, 3 or 4

- ACTING 1 - The Instrument Thursday 7pm - 10.30pm Code C
- ACTING 2 - Improvisation Tuesday 7pm - 10.30pm Code B
- ACTING 3 - The Scene Monday 7pm - 11pm Code A
- ACTING For The Camera Code D

A series of workshops to be held through out the year.

****Note: We will notify you via email or phone to CONFIRM your place in the class.***