

HOWZAT! ACTION CRICKET

ENROLMENT FORM

Date of enrolment: _____



Child Details:

FAMILY NAME: _____ GIVEN NAME: _____

AGE: _____ SKILL LEVEL (please circle): BEGINNER / INTERMEDIATE TERM: _____

PREFERRED SESSION TIME (please tick):

Term fee paid: YES / NO

	MONDAY	TUESDAY
5pm - 6pm		

Amount paid: \$ _____

Parent / Guardian Details:

Name: _____

Contact Number: _____

Email: _____

How did you hear about Howzat! Action Cricket Clinics? _____