



RSM Stage Academy
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APPLICATION FORM

This form is for students wishing to apply for a place at RSM Stage Academy.

Please Note: If completing online please download this application form and complete in full. Please return via email to info@rsmstageacademy.co.uk.
Any signatures required for the Permission, Notice and Declaration section on this application form will be completed in person upon your first enrolment.

CHECKLIST

COMPLETE
tick boxes below

1. This form must be completed by a Parent/Guardian on behalf of students under the age of 18.



2. Please complete this Application Form in BLOCK CAPITALS, using black ink only.



3. Attach a recent passport sized photograph of the applicant.



4. Enrolment fee paid in full (cash/card accepted).



Please ensure this Application is completed in full and all required items, documentation are included. Failure to do so may result in a delay or withdrawal of your application.

FOR OFFICE USE ONLY

Students Full Name:

Date of enrolment:

Start Date:

Academy Group:

Date of Birth:

Notes:

Ethnic Origin:

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APPLICATION FORM

PERSONAL DETAILS

NAME DATE OF BIRTH

ADDRESS ETHNIC ORIGIN

..... TEL

..... MOBILE

POSTCODE EMAIL

NEXT OF KIN (PRIMARY CONTACT IN THE EVENT OF AN EMERGENCY)

NAME DATE OF BIRTH

ADDRESS TEL

..... MOBILE

..... EMAIL

POSTCODE

ALTERNATIVE EMERGENCY CONTACT DETAILS (SECONDARY CONTACT IN THE EVENT OF AN EMERGENCY)

NAME DATE OF BIRTH

ADDRESS TEL

..... MOBILE

..... EMAIL

POSTCODE

Please Note: If you are over the age of 18 you do not require a parent/guardian signature. Please complete the Permission, Notice and Declaration below. If you are completing this application form online, any signatures required for the Permission, Notice and Declaration section will be completed in person upon your first enrolment.

PHOTO/VIDEO PERMISSION

Delete as appropriate.

I do/do not give permission for photos, videos and audio recordings to be taken of my Son/Daughter for promotional and educational use by RSM Stage Academy. This includes, but is not limited to; social media, websites, promotional materials and press advertisements. I understand that such images/recordings may continue to be used following termination of my Son/Daughters attendance at RSM Stage Academy.

Signed

Print Name

Date/...../.....

FEES AND NOTICE

I agree that should my Son/Daughter decide to leave RSM Stage Academy, I will give 2 weeks written and paid notice. I understand that all fees must be paid on time, before Academy classes commence and that no less than two weeks fees can be paid at any time.

Signed

Print Name

Date/...../.....

DECLARATION

I declare that all information on this form is accurate to the best of my knowledge. I will update RSM Stage Academy if any details change and accept that failure to provide the correct information may result in termination of my Son/Daughters place at the Academy.

Signed

Print Name

Date/...../.....

All information on this form will be handled as strictly confidential.