

2026 ENROLMENT FORM

Name: _____

Address: _____

Phone/s: _____

Email: _____

Date	Course	Full (\$)	Con (\$)
7 - 11 Jan	Script to Screen (5 days)	<input type="checkbox"/> 1445	<input type="checkbox"/> 1370
8 - 9 Jan	Writing, Acting & Directing (2 days)	<input type="checkbox"/> 595	<input type="checkbox"/> 575
9 - 11 Jan	Filmmaking Fundamentals (3 days)	<input type="checkbox"/> 850	<input type="checkbox"/> 795

International monies transfer fee (if applicable) 35 35

TOTAL AMOUNT PAYABLE

Concession Number _____ type _____ Total: _____

How did you hear about the course:

- Internet Search Recommended ATOM Film Vic
 Screen Australia Leaflet Melbourne University
 Other _____

**Please notify us by email to: summerfilmschool@me.com
or text 0402 359 047 when you make payment.**

Payment to: Kismet Film Productions, Commonwealth Bank of Australia, in AU\$
(BSB) 06 3299 (account number) 1000 7635

I have read and accept the refund conditions: _____

Please email enrolment form (this page) only to: summerfilmschool@me.com

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Tel: +61 3 9347 5035 Mobile: 0402 359 047 Email: summerfilmschool@me.com