DESPICABLE ME HOLIDAY CLUB REGISTRATION FORM

31 July - 6 Aug 2017 for 5-11yr olds

Child's Details:

First Name:	Last Name:_		
Address:			
Post			
Home Tel No : ()			
Age: Date of Birth:	//_		Male / Female
Emergency Contact: Name:	Mo	bile:	
E-mail address (if you would like to know abou	ut future childre	n's events a	et ELT):
Does your child have any medical cor (e.g. allergies, asthma, diabetes etc.)			Yes / No
Does your child have special needs? (e.g. difficulty reading/understanding	ıg, disability e	etc.)	Yes / No
If you answered Yes to either of the	ese questions	, please gi	ve details:
My child can go home on their own:			Yes / No
If possible, my child would like to be Name of Friend(s):	in the same o	group as t	heir friend
During the club we take photographs of the to be displayed in the church. Please tell so your child's photo taken or displayed in this	meone on the re		•
Parent's Signature I agree to my child joining the DESP Church from 31 July - 6 August and			
Signed :		Date : _	
Name in capitals:			
Relationship to child:		_	
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Book your place by returning this form to Andy at the church with £1.