ENROLMENT FORM/PARENTAL DETAILS

Please can you complete this form and return to Miss Haynes or Mrs. Lynn no later than Saturday 11th September. Even if you have completed a similar form in the past, we do require you to provide your details again so we can ensure we have an accurate record. Thank you.

STUDENT(S) NAME:

DATE OF BIRTH(S):

ADDRESS:

POST CODE:

HOME PHONE NUMBER:

PARENTAL MOBILE NUMBERS:

(Please supply all available mobile numbers)

EMAIL ADDRESS:

(Email address mostly used. This will be our primary line of communication for updates etc. If you need emails sending to more than one address, please supply details).

EMERGENCY CONTACT:

(Please supply full name, home and mobile numbers)
ANY MEDICAL CONDITIONS & OR ALLERGIES:

Do you agree for your child/children if required to be photographed or videoed whilst at the studios (for promotional purposes only)
YES I AGREE/NO THANKS (please delete).

I ADHERE TO ALL THE SCHOOL'S TERMS AND CONDITIONS (available to view on our website tozerstudios.co.uk - hard copies on request)

PARENTS/GUARDIAN TO SIGN:

DATE: