



# SKILLS FOR LIFE REGISTRATION FORM

CHILDS NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

DATE OF BIRTH: \_\_\_ / \_\_\_ / \_\_\_ HOODIE SIZE: \_\_\_\_\_

\_\_\_\_\_

CLASS/TEACHER: \_\_\_\_\_

\_\_\_\_\_

Caregivers/Parents details (name and phone number):

Known Allergies (nuts, gluten etc) or Medical Conditions: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Emergency Contact (name and phone number):

Special circumstances (family/living arrangements, religion, etc.) anything that we should know about:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**This program may finish after school hours, do you need this child to be dropped home?**

**If so please state the address:**

- At address above (please tick): Yes \_\_\_ or No \_\_\_ (if no please write address below)
- Alternate Name, address & phone number :

\_\_\_\_\_  
\_\_\_\_\_

**Do you give permission for your child to take part in the celebration outing at the end of the program? (This will take place outside of school and may run after school hours)**

Yes \_\_\_\_\_ or No \_\_\_\_\_

Signed: \_\_\_\_\_

Print Name: \_\_\_\_\_



**We are required by law to gain your consent. Please complete the following questions:**

1. Do you agree for your child to be a part of the Skills For Life Program?

Yes \_\_\_ No \_\_\_

2. Do you agree to have pictures of your child taken throughout the program?

Yes \_\_\_ No \_\_\_

3. We may use some of the work your child makes and/or photographs from this program for advertising for the Skills For Life Program, do you agree to this?

Yes \_\_\_ No \_\_\_

4. We would like to share with you photos and any of the work created by the children during this program with you on a private Facebook page, are you ok with this?

Yes \_\_\_ No \_\_\_

If so please tell us your Facebook name/profile so we can add you to the group page:

\_\_\_\_\_

- Please sign your name: \_\_\_\_\_

- Please write your name: \_\_\_\_\_ Date: \_\_\_\_\_

**We are so grateful for your time in completing this form, please feel free to contact us with any questions or concerns you may have. You are free to change any of the details above at your own wish, just let us know.**