REGISTRATION FORM

Signed:



\$40 registration fee per child, per year, is payable Term 1. The registration fee covers public liability insurance and concert costs.

Child 1:			,
First Name	Last Name		
Date of Birth			
Child 2:			
First Name	Last Name]
Date of Birth			
Parents Details:			
First Name		Last Name	
Best contact Number		Other contact number	
Address			
Relationship:			
Optional - Alternative Contact in case of emergency:			
First Name		Last Name	
Best contact Number		Other contact number	
Address			
Relationship:			
Does your child have any allergies, medical conditions or circumstances RDC should be aware of?			
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Do you give permission for your child's photo to be:			
☐ taken for end of year individual and group photos☐ to be used for promotional purposes, ie Facebook, flyers etc			
Please note that the end of year concert is videoed and available for purchase.			

Date: