Autumn 09 Booking Form

Name

Age DOB

Boy / Girl

School

Medical / Allergy information (indoor & outdoor)

How did you hear about us?

Name of parent / guardian:

Home address

Contact telephone

Emergency contact no.

Email

October Workshop 1

Mon 26th Oct Tue 27th Oct Wed 28th Oct Thu 29th Oct Fri 30th Oct

☐ Please tick box if you don't want your child photographed for future marketing material.

I confirm I have read and understood all the terms and conditions.

Signature Date

Cheques should be made payable to **Highgate School of Dance & Drama Ltd**
and sent with this form to: **119 Windmill Lane, Bushey Heath, Herts, WD23 1NE**