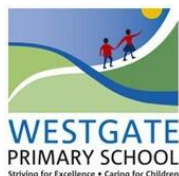


# WESTGATE PRIMARY SCHOOL



## OUT OF SCHOOL CLUB REGISTRATION

Your Name \_\_\_\_\_

Your address : \_\_\_\_\_

\_\_\_\_\_

Your child's Name (s)      1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

Your workplace details \_\_\_\_\_

\_\_\_\_\_

Main contact numbers:

Home \_\_\_\_\_

Work: \_\_\_\_\_

Mobile \_\_\_\_\_

Other friend / relative as emergency number: \_\_\_\_\_  
(Please also state the relationship)

Does you child / children have specific dietary likes / dislikes or allergies?

\_\_\_\_\_

\_\_\_\_\_

Please say anything your child / children especially like to do at or out of school.

\_\_\_\_\_

\_\_\_\_\_

I have read and understood the information about the Out of School.

Signed \_\_\_\_\_ Date \_\_\_\_\_