THE PENNYPIT COMMUNITY DEVELOPMENT TRUST

NORTH GRANGE AVENUE
PRESTONPANS
EH329BN
01875 815 221

CONTACT PERSON – KARMAN BROWN (M) 07468 612477

MEMBER DETAILS

Name:

Address: _____

Date of Birth: _____ SCHOOL YEAR: _____

Parents/Emergency contact names & numbers _____

Email: _____

MEDICAL DETAILS

Doctor's Name: _____

Address: _____

Telephone Number: _____

Does your child have any medical conditions? Yes / No

If yes, please give details: _____

I consent to the above named member being able to take part in activities arranged by the PENNYPIT go4fun and confirm that I am responsible for my child's safety whilst travelling to and from the go4fun.

I will abide by the rules at the PENNYPIT go4fun project and ensure that my child follows them.

I will/will not allow photographs of my child _____ to be used in PENNYPIT go4fun, including the trust website.

Signature: Name:

Date