

# REGISTRATION FORM 2019



Please print clearly.

## Parent/guardian details

First name: \_\_\_\_\_ Last name: \_\_\_\_\_

I have attended Music Time in previous years (circle one): YES/NO \_\_\_\_\_

Year(s): \_\_\_\_\_

Email address: \_\_\_\_\_

Postal address: \_\_\_\_\_

Postcode: \_\_\_\_\_

Home phone: \_\_\_\_\_ Mobile: \_\_\_\_\_

## Participant details

Name of child	M/F?	Date of birth

Your relationship to the child(ren): \_\_\_\_\_

Allergies: \_\_\_\_\_

## Emergency contact (other than attending parent/guardian)

First name: \_\_\_\_\_ Last name: \_\_\_\_\_

Relationship to the child(ren): \_\_\_\_\_

Contact phone number: \_\_\_\_\_

I understand that these personal details will be added to the Summer Hill Anglican Music Time database, email and SMS lists and that they will be used for the purposes of Music Time and associated activities. I understand that I can unsubscribe at any time.

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

SUMMER HILL CHURCH :: CNR OF SMITH AND HENSON STREETS, SUMMER HILL :: (02) 9798 5300 :: MUSICTIME@SUMMERHILLCHURCH.ORG.AU :: HTTP://WWW.SUMMERHILLCHURCH.ORG.AU/MUSIC-TIME

### Office use only:

Added to database: \_\_\_/\_\_\_/19     Added to mailing list \_\_\_/\_\_\_/19



**Summer Hill Church**  
seek • share • strengthen • serve