

Sunday Groups Registration Form (<i>younger groups</i>)		
Child's name		Group: <ul style="list-style-type: none"> • Crèche • Seedlings • Thumbs Up
Date of birth	School year (2018-2019)	
Address (incl. postcode)		
Contact telephone number(s)		Email address(es)
Toileting (<i>for pre-school children</i>): <i>please delete as appropriate</i> <ul style="list-style-type: none"> • wearing nappy • needs assistance in toilet & I am willing for leader to help them • can use toilet independently 		
Please give brief details of any allergies or medical condition(s) we need to be aware of		
Are you happy for this child to be given snacks / drinks in the group?		
What are your child's particular interests/hobbies/things they like doing?		
Is there anything your child generally finds difficult / would value help with?		
Additional information (anything else you think that the group leaders might need to know e.g. specific learning or behavioural needs...)		
Name of parent / adult with parental responsibility		
Signature		Date