YOUNG & TALENTED
SCHOOL OF STAGE AND SCREEN

@ Oxford House, Derbyshire Street, E2 6HG
Phone 020 8556 5348 ~ Mobile 07973 440 775
E-mail ~ yandt@ymail.com

REGISTRATION/CONSENT FORM

CHILD NAME	PARENT NAME
AGE	ADDRESS
DATE OF BIRTH	
MALE	FEMALE	
Child mobile	POST CODE
CHILD EMAIL	PARENT EMAIL

ETHNICITY

Asian British
  Bangladeshi   [   ]
  Chinese   [   ]
  Indian   [   ]
  Other_____

Black British
  African   [   ]
  Caribbean   [   ]
  Other _____

White British   [   ]
        Other _____

Mixed Race   _____

Other   _____

MOBILE NUMBER

HOME PHONE NUMBER

EMERGENCY CONTACT NAME

EMERGENCY CONTACT NUMBER

MEDICAL DETAILS, ALLERGIES & MEDICATION

I give consent to the administering of any necessary medical attention   Y [   ] N [   ]

I give permission for my child to be photographed/ filmed for general publicity   Y [   ] N [   ]

I give permission for my child to go home alone   Y [   ] N [   ]

PRESENT SCHOOL

REGISTRATION FEE £15

Signature…………………………………………………   Date…………………………………………

Relationship to child ………………………………………..

Thank you for your time in filling out this form. All information is treated as confidential