

RUISLIP R.F.C. BOOKING FORM

COURSE START DATE: Wednesday 24th February 2010

PUPIL'S NAME: **YEAR: 8 / 9 / 10 / 11** (please circle)

SCHOOL: Nower Hill High School

PUPIL'S ADDRESS:

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POSTCODE:

Please give details of any medical conditions:

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Can you please confirm how your child will be collected:

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Emergency Contact Name:

Telephone No:

Email address:

Signature of Parent/Carer:

I have enclosed a cheque of £18.00 made payable to Nower Hill High School which will be paid to the Ruislip R.F.C.

Please note that images may be taken at the sessions. Ruislip recognises the need to ensure the welfare and safety of all young people. As part of our commitment to ensure the safety of young people we will not permit photographs or other images of young people to be taken or used without the consent of parents/carers and the young person.

Therefore, if you do not wish for your child to appear in any photos please tick here