



William Penn School
'Living, Laughing and Learning Together'

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Headteacher: Mr Stephen Kear



The Friends Club Registration Form

Please note that all school policies and procedures apply, for example, medical and media consent forms.

Child's Full Name:			
Child's Date of Birth:			
Mother's Name:		Mobile Telephone:	
Father's Name:		Mobile Telephone:	
Address:			
Email/s:			
Home Telephone:			
Work Addresses:			
Work Telephone Nos:			
Doctors Surgery:		Surgery Telephone:	
Parental Consent:	I confirm that I have read and understand the Terms and Conditions of my child joining The Friends Club. I confirm that I understand that payment needs to be made prior to my child attending The Friends Club.		
Signature:		Date:	