



Starmakerz Theatre School, Oxted

Registration Form 2020

Child's Name.....Date Of Birth.....

Parent/Guardian Name.....

Address.....Post Code.....

Mobile..... Home.....

Email.....School.....

Medical Conditions

Has your child got any medical conditions we should be aware of?	
Is your child taking any medication?	
Does he/she have difficulty with hearing/eyesight	
Does your child suffer with any allergies?	
Is there anything else you would like us to be aware of?	

Emergency Contacts

In the event you are unavailable please supply two alternative contact numbers:

Name.....Number.....

Name.....Number.....

Please tick this box to confirm you have read and agreed to the Terms & Conditions and the Privacy Policy on the Starmakerz website

Please tick this box to confirm your consent to photographs and video footage for use in promotional material for Starmakerz Theatre School

Principal: Victoria Butcher

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