

Saint Pancras Community Association

Registration form

Please use **BLOCK CAPITAL** letters when completing this form

Child's Name	
Date of Birth	
Gender	
Address	
Post code	
Contact number	
Email address	

Health and Wellbeing @ SPCA: Please tick what activities you are registering for

Steppaz (4.30pm-5.30pm) Steppaz (5.30pm- 6.30pm)

Family Fitness (10am - 12pm) Children's Fencefitt Bike-ability

NL Taekwondo (Beginners)

Medical details

Ethnicity (Please specify)

Please indicate any medical conditions

Emergency contact information

Name:
Contact number:

Name:
Contact number:

Disability

Do you have any long-standing illness, disability or infirmity?

If yes, please specify _____

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Are you happy to have your photograph taken whilst taking part in activities with St Pancras Community Association and to have your photograph displayed on our website which is available for the public to see?

Yes No

GDPR (General Data Protection Regulation) replaces the Data Protection Act from 25/05/2018. We need to keep information for you such as Contact Information or Medical/ Emergency Information.

Please fill out and return this consent form to confirm that you still wish us to keep your information and how you wish to be contacted.

I give permission for my registration form information to be accessed by SPCA staff & instructors

Sign & date

I give permission to be contacted with opportunities for volunteer and/or in fundraising at SPCA

Sign & date

I give permission to be contacted about SPCA Events eg Summer Fair, Newsletters

Sign & date

I give permission to be receive updates on SPCA's health and wellbeing program

Sign & date

I give permission (please tick boxes as appropriate) to be contacted via:

Post Email Telephone Text Message

Where did you hear about the health and wellbeing program @ SPCA?
