



REGISTRATION FORM
High Seas Expedition – 2010 (Hosted by International Baptist Church)

Personal Details

Surname	Child Name	Guardian
<input type="text"/>	<input type="text"/>	<input type="text"/>

Residential Address

Gender	Date of birth	School Grade/Year
<input type="text"/>	<input type="text"/>	<input type="text"/>

Telephone Number/s	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

Days Able To Attend:

Tues: Y / N	Wed: Y / N	Thurs: Y / N
<input type="text"/>	<input type="text"/>	<input type="text"/>

Medical Information:

Allergic Reactions (e.g. foods, bandaid, etc)	Other Medical/Dietary needs
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

Emergency Contact 1	Emergency Contact 2
Name :	Name :
Phone :	Phone :

Regular Physician
Name :
Phone :

Medicare Card N ^o	Health Care Card N ^o
<input type="text"/>	<input type="text"/>

Does your child carry an epi pen? (Please Circle)	Yes / No
<input type="text"/>	<input type="text"/>

Payment:

Personal Cheque/Money Order: Y / N	E-Banking: Y / N
Payable to: International Baptist Church PO Box 461, Essendon, Vic 3040	Account Name: International Baptist Church General Fund BSB: 063129 Account Number: 10084154 Reference: 'Surname', LBDO

General:

Would you like to be on our mailing list? (Please Circle)	Yes / No
<input type="text"/>	<input type="text"/>

There will be a DVD of the program available for purchase in the coming months, at a cost of \$15. Would you like to pre-order a copy of the DVD? (payment can be made when the DVD is complete) (Please Circle)	Yes / No
<input type="text"/>	<input type="text"/>

(if you do not wish your child to be filmed or photographed for this DVD please advise us at the registration desk).

How did you hear about "**Little Big Day Out** "? (e.g. friend, flyer, mailout, etc.)

Signature :	Date :
<input type="text"/>	<input type="text"/>