



# Howell School of Acting Registration Form

<b>Students Name</b>			
<b>Age</b>		<b>Date of Birth</b>	
<b>Gender</b>			
<b>Child's Doctor's Surgery</b>			
<b>Any Medical requirements?</b>			
<b>Any food / religion requirements?</b>			
<b>Any learning difficulties and disabilities?</b>			
<b>Parent/Guardians name's</b>			
<b>Address.</b>			
<b>Post Code.</b>			
<b>Home telephone number.</b>			
<b>Work Telephone number (Parent 1).</b>		<b>Work telephone number. (Parent 2).</b>	

<b>Mobile number (Parent 1).</b>		<b>Mobile number (Parent 2).</b>	
<b>Email Address</b>		<b>Email Address</b>	
<b>Club</b>		<b>Start Date</b>	
<b>1A) I give permission for my child to use Dr Browns Hand Sanitizer provided by Emi Howell</b>	<input type="checkbox"/>	<b>I give permission for my child to wear plasters and use disinfectant wipes if needed, administered by Emi Howell</b>	<input type="checkbox"/>
		<b>T-shirt Size</b> (not applicable for the afterschool club)	
<b>1B) I will provide my own hand sanitizer in place of Dr Browns (please only tick this if you left 1a empty)</b>	<input type="checkbox"/>	<b>Any allergies, food or otherwise please state:</b>	
<p>I hereby consent for my child to take up a place at the club specified above with Howell School of Acting. I have understood the expectations and obligations relating to both myself and the club and agree to abide by them. I understand that late or non-payment of fees is subject to a charge being levied.</p> <p>In case of any medical emergency I/we agree to my child being given the necessary treatment until the time that I can be contacted.</p> <p>I confirm that I will inform Howell School of Acting before the any club or class if my child or anyone in close contact with my child has been abroad in the last two months, if so where and what date they returned to the country. If this changes during the term I will inform Howell School of Acting immediately.</p> <p>If any student does develop flu-like symptoms, or anyone in close contact with them does, Howell School of Acting will need to be informed and steps will need to be taken that may include not attending the class/club and other parents being informed.</p>			

I confirm that the information given above is correct, and that it is my responsibility to inform the supervisor as soon as possible if any details are changed.

I understand that Howell Productions & Howell School of Acting will use photos during activities with the children and that these can be used for the club's promotion of their business via their web page or general literature.

I agree to give over any rights I may have in any films or photos created, to Emi Howell of Howell Productions. This will allow us to distribute the media in any and every way we can.

Howell School of Acting's clubs and classes include children under 18. For that reason it is critical that you are aware that if you have any concerns regarding the students, Emi Howell is the first point of contact as she has a current DBS.

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**Signature and Date**

Date.