

Signature

## **The Maple Tree Registration Form**

We keep details about you and your family so that we can tailor our services to your needs, give you information about our services and use anonymised data for fundraising purposes. In the current Covid-19 situation we will also use this information if needed for the purposes of the NHS track and trace system. We have a privacy notice that sets out the data we collect and how we use it. Please ask for a copy if you wish to see this.

About you			
Title	First Name	Family name	
Address			
Postcode			
Email addres	s		
Phone number	er		
Relationship	to child*		
	ve parental responsibility for the child or chaplete and sign the consent information.	ildren you are bringing to the centre, please ask the child's	
About you	r child/children		
Name(s) Date(s) of birth			
home languag		w to help support you and your children such as ood allergies. Use the back of the form if you r about your family needs.	
	to the Maple Tree holding the above funding and providing activities the	e personal details about my family for the at meet the needs of my family.	
I would like to  ☐ details of the		rly newsletter □ details of events and projects	

Date