## Ten Acres Forest School Booking form



Name o Age	of Child Preferred Pronouns		
Does your child have any allergies, additional needs or other needs we need to know about? (We may call you to discuss)			
Name of Parent/s Contact Telephone Number Emergency Contact Number			
•	ster first aid as appropriate to my child.		

## Ten Acres Forest School



## **Optional Extras**

(These help our training and to get future funding for sessions) Please tick all that apply and sign at the bottom.

o I give permission for you to take pictures of my child in this setting for use in training practitioners

o I give my permission for you to take pictures of my child for use on social media/websites for Sustainable Life and Friends of Ten Acres only.

o I give my permission for you to take pictures of my child to provide to funding bodies.

o I give permission or you to take photographs of my child provided they cannot be identified in the images (from a distance, no faces etc)

o I do not give any permission for photographs of my child in these sessions.

Signed	
Date	