

Holiday Workshop Enrolment and Booking Form 2017



Childs full name: _____

Childs DOB: _____ Gender: _____

School: _____ School Grade: _____

Does your child have asthma, allergies or any other medical conditions?

If yes please give details _____

Emergency contact #1

Name: _____

Relation: _____

Phone number: _____

Emergency contact #2

Name: _____

Relation: _____

Phone number: _____

Join our mailing list for the latest creative workshop updates

Email: _____

You will be added to our mailing list for workshop updates!

How to prepare for your Studio Make Workshop:

- Wear comfortable clothes that can get messy!
- Bring a water bottle that can be refilled
- Bring a packed lunch if you are attending a morning and afternoon session
- Morning tea is provided for morning sessions
- Afternoon tea is provided for afternoon sessions

Medical Emergency

The undersigned parent/guardian gives permission to Studio Make to seek medical treatment for the participant in the event that a parent or guardian cannot be reached.

Release of Liability

The undersigned parent/guardian releases Studio Make from all liability and claims related to any loss, damage or injury that may be sustained by the participant while on the premises and while under the supervision of Studio Make employees.

Parent/Guardian Name: _____

Signature: _____ Date: _____