



New Customer Enrolment Form Holiday Programme December 2011/January 2012

Manukau Leisure

Centre: _____

PROGRAMME

Age Group: 5-7 yrs 8-10 yrs 11-13 yrs

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CHILD 1

Wk 1 Mon Tue Wed Thu Fri

CHILD 2

Wk 1 Mon Tue Wed Thu Fri

Wk 2 Mon Tue Wed Thu Fri

Wk 2 Mon Tue Wed Thu Fri

Wk 3 Mon Tue Wed Thu Fri

Wk 3 Mon Tue Wed Thu Fri

Wk 4 Mon Tue Wed Thu Fri

Wk 4 Mon Tue Wed Thu Fri

Wk 5 Mon Tue Wed Thu Fri

Wk 5 Mon Tue Wed Thu Fri

Total Programme Cost: \$ _____

Total Programme Cost: \$ _____

PARTICIPANT DETAILS

CHILD 1

Name: _____ Date of Birth: _____ Gender: Male Female

Medical conditions, illnesses, or allergies? _____

Dietary considerations: _____

CHILD 2

Name: _____ Date of Birth: _____ Gender: Male Female

Medical conditions, illnesses, or allergies? _____

Dietary considerations: _____

GUARDIAN DETAILS

Parent/Guardian 1 Name: _____ Gender: Male Female

Parent/Guardian 2 Name: _____ Gender: Male Female

Address: _____

Phone (h): _____ Phone (m): _____ Phone (w): _____

What ethnicity you most identify with: European Maori Pasifika Asian Other _____

Email: _____

I would like to keep up to date with related programmes, news & events from Manukau Leisure.

Family Doctor: _____ Phone: _____

Person(s) authorised to collect my child(ren):

Name: _____ Relationship: _____ Ph: _____

Name: _____ Relationship: _____ Ph: _____

Name: _____ Relationship: _____ Ph: _____

Name: _____ Relationship: _____ Ph: _____

Person(s) denied access to my child(ren) (please provide a copy of the court order) _____

Payment is required at the time of enrolment.

Terms & conditions will be printed on your programme confirmation. These must be signed prior to commencing your chosen activity.

Parent/guardian signature: _____ Date: _____

OFFICE USE

Date entered into session: _____ Course Code: _____ Amount Paid: _____

Staff Member: _____ Staff Signature: _____