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| ***Providers of photography workshops across the education sector*** | **Education in Focus**  460 Birmingham Road  Marlbrook, Bromsgrove  Worcestershire B61 0HR  T: 01527 574359 M: 07580 136641  E: [mike@education-in-focus.co.uk](mailto:mike@education-in-focus.co.uk)  W: [www.education-in-focus.co.uk](http://www.education-in-focus.co.uk) |

**After school photography club**

**Registration form**

I would like my son/daughter to attend the Education in Focus after-school photography club, lasting for one hour from **3.30 – 4.30** on **Thursday** **afternoons**, for **six weeks after half-term** commencing **4th November.**

I understand that the club will be run within the school by Mike Jones of Education in Focus on an ‘External Resource Provider’ basis. I will complete this form and return it to him via email: [mike@education-in-focus.co.uk](mailto:mike@education-in-focus.co.uk) by **Thursday 14th October**, this being the closing date for applications.

Upon receiving confirmation on **Monday 18th October** of my son/daughter’s place within the club, I’ll ensure my remittance for the sum of **£30.00** is made via online banking directly to the Education in Focus account at NatWest by **Friday 22nd October** using the sort code: **60-04-05**, account number: **85222550** to guarantee my child’s place in the club. *I’LL ENSURE THAT I INCLUDE THE CODE:* ***CPS*** *AND MY* ***CHILD’S NAME*** *WITHIN MY PAYMENT REFERENCE.*

Alternatively, I’ll make my cheque payable to Education in Focus and ensure that my son/daughter takes it to the club on **Thursday 4th November**.

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| Child’s Name: |  | Class: |  |
| Remittance: | **Online banking** / **cheque**  *(please delete as appropriate)* | Online  Date paid: |  |
| Cheque reference: |  | Online  reference: |  |

I understand that in attending the camera club, my son/daughter might possibly have his/her photograph taken by other children and I am happy to provide my consent.

*NB: All photographs taken during the Education in Focus club sessions will only be stored within your son/daughter’s camera/device.*

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| Signed  (Parent / Guardian) |  | | |
| Please print name: |  | Date: |  |
| Your preferred email address: |  | | |
| Being picked up by: |  | | |
| Emergency contact number: |  | | |