



## New student sign-in form

Venue: \_\_\_\_\_

Child's name: \_\_\_\_\_ DOB: \_\_\_\_\_

Parent's /Carers Name: (Print) \_\_\_\_\_

**YogaPebbles advises you to consult your GP/physician on your behalf and/or on the behalf of your child, regarding any previous or existing medical condition/issue, and/or yours or your child's physical suitability to participate in YogaPebbles classes.**

Previous or existing medical Information and/or regular medication:

\_\_\_\_\_

Any know allergies: \_\_\_\_\_

Any other information I may need to know about you/your child:

\_\_\_\_\_

Mobile Number: \_\_\_\_\_

First Emergency Contact : (name and number) \_\_\_\_\_

Second Emergency contact: (name and number) \_\_\_\_\_

Due to Data Protection Laws please decide if **you do wish** to be contacted by email/message/phone. Lisa Greenough will keep these permissions on file for a period of 12 months from May 1, 2018, at which time these will need to be re-completed annually. Parents/carers can request a copy of any information *YogaPebbles* holds and can be changed at any time following discussion. Any collected information (email/phone number etc) will be used to update you about *YogaPebbles* services and will be stored confidentially by Lisa Greenough.

Email: \_\_\_\_\_ **Yes, I agree to be contacted:**

Signature: \_\_\_\_\_ Date \_\_\_\_\_

Permission for Promotional photographs/ videos on. **PLEASE TICK IF YOU GIVE PERMISSION.** No names will ever be used on our social media or our website.

*YogaPebbles* website (Yogapebbles.co.uk):

*YogaPebbles* social media (Facebook, Twitter, Instagram):



