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**Registration Form**

**FOOD ACADEMY**

**160 Pitfield Way, Stonebridge, London, NW10 0PW**

**www.sufra-nwlondon.org.uk**

**Registered Charity No. 1151911**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Child/Young Person’s Details | | | | | | | | |
| First name: | | | | Surname: | | | | |
| Address: | | | |  | | | | |
|  | | | | Postcode: | | | | |
| Date of birth: | | | | Gender: | | | | |
| Telephone number: | | | | E-mail address: | | | | |
| Emergency Contact Details (if under 16 years) | | | | | | | | |
| Name: | | | | Relationship: | | | | |
| Telephone number: | | | | E-mail address: | | | | |
| Name: | | | | Relationship: | | | | |
| Telephone number: | | | | E-mail address: | | | | |
| Child/Young Person’s Ethnicity | | | | | | | | |
| White British | | |  | Asian – Bangladeshi | | |  | |
| White Irish | | |  | Other Asian Background\* | | |  | |
| White Other | | |  | Chinese | | |  | |
| Black Caribbean or British Caribbean | | |  | Mixed – White and Black Caribbean | | |  | |
| Black African or British African | | |  | Mixed – White and Black African | | |  | |
| Other Black background\* | | |  | Mixed – White and Asian | | |  | |
| Asian – Indian | | |  | Other Mixed Background\* | | |  | |
| Asian – Pakistani | | |  | Other Ethnic Background\* | | |  | |
| \*if other, please indicate | | |  |  | | |  | |
| Child/Young Person’s Faith | | | | | | | | |
| Christianity |  | | | Buddhism | |  | | |
| Judaism |  | | | Hinduism | |  | | |
| Islam |  | | | Sikhism | |  | | |
| No religion |  | | | Other: | |  | | |
| Child/Young Person’s Medical Conditions & Dietary Preferences | | | | | | | | |
| Do you suffer from any medical conditions/disability? Yes  No | | | | | | | | |
| Do you have any dietary preferences? Yes  No | | | | | | | | |
| If yes to EITHER question above, please provide more details so that we can make reasonable adjustments: | | | | | | | | |
| How did you hear about us? | | | | | | | | |
| Sufra E-Mail/Mailing List | |  | | School | | | |  |
| Family/Friend | |  | | Local Organisation/Charity | | | |  |
| If other, please provide more details: | | | | | | | | |
| Declaration | | | | | | | | |
| 1. I agree to pay a **£10 deposit** to confirm registration which will be returned at the end of the course. Your place on the course will NOT be confirmed until receipt of payment. 2. I understand that my child is expected to attend ALL sessions of the course in order for the deposit to be returned) 3. I give permission for Sufra NW London to take photographs during the course for publicity purposes and reporting to funders. | | | | | | | | |
| Payment Options:Cash payment submitted to a member of staff at the office.Cheque payable to “Sufra NW London” and posted to the office.Bank Transfer to Sufra NW London (Sort Code: 40-46-10 and Account Number 01537881 with Reference: FOODACAD)Credit Card payment via our website donation button | | | | | | | | |
| Parent/Guardian Signature: | | | | | Date: | | | |
| Payment Method: | | | | | Payment Date: | | | |