



Dalmuir Out of School Care Group (DOSCG)
Registration form

Date:	Parent/Carer name:
Name of your child:	Parent/carer name:
School child will be attending:	Relationship to the child:
Contact details of Parent/Carer	
Home telephone number:	
Mobile telephone number:	
Work contact number:	
Emergency contact name and number:	
E-mail address:	
Parents signature:	Date:
Project Co-ordinators signature:	Date: