

Essex Children's University CU Families Annual Membership Registration Form – existing member

Name		Date of	birth			Male		Female	
Passport to		Does your child		d	Ye	s/No			
Learning number		have an E-Passport?							
Home address		Is this up to date? Yes/No							
including									
postcode									
School attended		Year	OR	Electiv	e F	lome			
				Educat					
Parent/Carer detai	ls:								
Contact details for Parent/carer	Name:								
	Relationship to child:								
	Home telephone:								
	Mobile no.:								
	E-mail:								
Each month Essay (CII produces a monthly po	welottor	for Dare	nts/sar	orc	If you	200	roo to	
Each month Essex CU produces a monthly newsletter for Parents/carers. <u>If you agree to your e-mail address being added to the eNewsletter database please tick.</u>									
All Information will be handled in a secure and confidential manner and held in accordance									
with the 1998 Data Protection Act. Individual data will not be used outside of Essex CU.									
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☐ If paying by BACS please return this form to Essex Children's University, c/o Stanway Federation Learning Centre, Paxman Avenue, Colchester CO2 9DQ or e-mail to:									
admin@essexchildrensuniversity.co.uk									
Details of how to pay and a reference number will then be sent to your e-mail									
address. If paying by cheque, please send your payment, together with the registration form									
	• • • •	_	ration Learning Centre, Paxman						
Avenue, Colchester CO2 9DQ with your cheque payable to Essex Children's Unive									
Trust.									
Please tick your preferred method of payment									