
WINTER OF FOOD AND FUN 2022 – REGISTRATION FORM



Southwark Children and Family Centres
Peckham, Peckham Rye and Nunhead

About You - If handwritten please use BLOCK CAPITALS

First Name:	Surname:	DOB:	Contact Number:
Address:			

About your child/ren – Please give details of all the children attending the project.

First Name	Last Name	Date of birth	Age	Name of school (if any)	Gender M/F

Please circle as appropriate

Do you or any of your child/ren have a disability? YES/NO
If yes, please provide details _____

Do you or any of your child/ren have medical needs? YES/NO
If yes, please provide details _____

Do you or any of your child/ren have allergies? YES/NO
If yes, please provide details _____

Do you or any of your children have any special dietary requirements? YES/NO
If yes, please provide details _____

Does any of your child have entitlement to free school meals? YES/NO
If yes, please specify which one _____

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EMERGENCY CONTACT

Name	
Mobile Number	

Please circle or highlight as appropriate.

AOTH	Any other Asian background	BCRB	Black Caribbean	LATAM	Latin/South/Central/ American	MWBC	White/Caribbean	WROM	Gypsy
ABAN	Bangladeshi	BAFR	Black African	MWBA	Mixed: White/Black African	WOTH	Any other White background	NOBT	Info not obtained
AIND	Indian	BOTH	Any other Black background	MOTH	Mixed: Any other mixed background	WBRI	White: British	REFU	Refused
APKN	Pakistani	CHIN	Chinese	MWAS	Mixed: White/Asian	WIRI	White: Irish	OOTH	Any other ethnic background
BBRI	Black British					WIRT	Traveller: Irish Heritage		

Please indicate which option you would like to choose.

You can choose both options if you want. Please note that you CANNOT book for individual days.

Option 1 – 19 th and 20 th December (Monday and Tuesday)	Option 2 – 21 st and 22 nd December (Wednesday and Thursday)
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Please indicate which slot you would prefer to attend – circle or highlight the relevant one.

AM - 10am to 12noon	PM – 1.30pm to 3.30pm
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Email address of the main carer _____

IMPORTANT: You will receive an email confirming your booking dates and times, closer to the date that you have chosen.

Please send the filled form to: aingrassia@ivydale.southwark.sch.uk