



The Wilson Home Trust

For Children with Physical Disabilities

www.wilsonhometruster.org.nz

Online Drumming School Holiday Registration Form

CHILD'S DETAILS:

First Name: _____ Surname: _____

Date of Birth: _____ Address: _____

To be eligible the child must have a physical disability – please state your child's disability

First-time contact please email a diagnosis letter with the registration form.

Ethnicity _____

Sibling names and D.O.B attending: _____

PARENT/CAREGIVER DETAILS:

First Name: _____ Surname: _____

Phone: _____ Mobile: _____

Email: _____ Relationship to child: _____

Location: Online

Time: 10.30 am – 11.30 am

A \$5.00 non-Refundable Registration Fee per child. This can be deposited into Account Number: 12-3113-0000916-00, Reference: HolProg & your name.

Please return this form to felicityh@wilsonhometruster.org.nz