



# St. John Ambulance Training Branch

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Please join our Facebook Group "St John Ambulance - Training Branch"

## THREE CROSS AWARD FIRST AID REGISTRATION FORM FOR 9 TO 13 YEAR OLD.

DATE THAT YOU WISH TO START COURSE (please refer to schedule): \_\_\_\_\_

NAME: \_\_\_\_\_ SURNAME: \_\_\_\_\_

*FEE IS € 25.00 - CHEQUES SHOULD BE MADE PAYABLE TO ST JOHN AMBULANCE*

AGE: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_ Boy or Girl: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_

HOME TEL. No.: \_\_\_\_\_ STUDENT'S MOBILE No.: \_\_\_\_\_

Please advise if the student will be picked up or will travel on their own after the lesson.

Picked up

Leave on their own

PARENT'S NAME (PRINT): : \_\_\_\_\_

PARENT'S MOBILE No.: \_\_\_\_\_ PARENT'S ID card No.: \_\_\_\_\_

**PLEASE ADVISE US IF THE STUDENT HAS ANY MEDICAL CONDITIONS OR ALLERGIES.**

PARENT'S SIGNATURE : \_\_\_\_\_