

KIRKLEES COLLEGE

FESTIVAL FEVER 2019

ENTRY FORM



NAME:	DATE OF BIRTH:
ADDRESS LINE 1:	
ADDRESS LINE 2:	
TOWN/CITY:	POSTCODE:
CONTACT EMAIL:	CONTACT NUMBER:
EMERGENCY CONTACT NUMBER:	EMERGENCY CONTACT NAME:
SCHOOL:	YEAR GROUP:
TEACHER CONTACT:	
PLEASE TELL US WHY YOU HAVE CHOSEN THIS DESIGN AND WHAT PRODUCTS/TOOLS YOU WOULD NEED TO MAKE IT REAL:	
Please email completed form and return to schoolsliaison@kirkleescollege.ac.uk by 12.00pm Friday 5 April 2019 .	