

# The London Cinderella Project Registration Form 2010



Please fill out this registration form completely, upon completion of this form.

Fax it to:

c/o The Cinderella Project  
(226) 663-5044

Fittings are held at the Four Points Sheraton March 11<sup>th</sup> (11:00-7:00) and March 11<sup>th</sup> (12:00-5:00)

**PLEASE COMPLETE A SEPARATE FORM FOR EACH CHILD**

## Registration Form

Date: \_\_\_\_\_

Name of Child: \_\_\_\_\_

Age: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Dress Size (approx.): \_\_\_\_\_

School: \_\_\_\_\_

Grade: \_\_\_\_\_

Home Phone Number: \_\_\_\_\_

School Phone Number: \_\_\_\_\_

## Referring Contact Person - Teacher, Principal or Social Worker

(from school or community agency)

Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Agency or School: \_\_\_\_\_

## Permission Signatures

I, \_\_\_\_\_ (Parent/Guardian) hereby give my permission for

(my child) \_\_\_\_\_ to participate in the London Cinderella Project.

Date: \_\_\_\_\_

Signature of Parent/Guardian: \_\_\_\_\_

**[www.londoncinderellaproject.com](http://www.londoncinderellaproject.com)**

Please return this form to the above fax number by March 1, 2010

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