

Continuing Individual Membership Application for Wakefield Children's University

Please complete this form in full and return with annual membership fee of £15 per child.

Kayleigh Moore
Wakefield Children's University
Wakefield College
Thunderhead Ridge
Castleford
WF10 4UA

email: childrensuniversity@wakefield.ac.uk

Contact Information	
Name of Parent/Guardian	
Address	
Postcode	
Contact Phone Number	
Contact Email Address	

Preferred method of contact Email Post

Membership Information			
	Child 1	Child 2	Child 3
Name			
Date of Birth			
Which school does your child attend?			

Parent/Carer Name:	
Signature:	
Date:	

Payment can be made by:

Cheque: payable for £15 to **Wakefield College** and sent with this application to the above address including your child's name and individual passport number in the front of the Passport to Learning.

Credit or Debit Card: please telephone 01924 789386 quoting Wakefield Children's University Individual Membership

Terms and Conditions of Membership available at www.wakefield.ac.uk/about-us/childrens-university