

Pupil Registration Form For *First Edition* Days

All completed forms received before 26th February 2010 will be entered into a prize draw and if chosen, you could win an ipod or vouchers for GAME. Results will be published on www.etrust.org.uk in March 2010.

Pupils will need to obtain their parent / guardian's signature before handing this form to their teachers to sign and send back to;

Post: FAO Katy Evans, EDT First Edition, Weltech Centre, Ridgeway, Welwyn Garden City, Hertfordshire, AL7 2AA.
Email: firstedition@etrust.org.uk
Fax: 01707 393 133

Please refer to our website for more information about *First Edition*: www.etrust.org.uk

All fields marked with an asterisk (*) are required. Please complete this form in BLOCK CAPITALS.

This information is required as part of the registration process. All information provided will be treated as confidential and for office use only.

Your personal details

Date of First Edition Course: _____ Name of your school/college*: _____

First Name*: _____ Last Name*: _____

Male / Female*: _____ Date of Birth*: ____/____/____ Nationality: _____

Home address*: _____ Post Code *: _____

Your ethnic origin * (Please tick relevant box)

This may not be the same as your nationality or place of birth. This is for statistical purposes and to ensure that we are addressing issues of diversity.

White Black Caribbean Black African Black Other

Indian Pakistani Bangladeshi Chinese

Other (Please Specify) _____

For which of these subjects do you have a particular interest (please tick)?

Maths Science Design & Technology Engineering

If none of the above please state subject(s):

What interests you about *First Edition*?

How did you hear about *First Edition*?

Teacher Signature: _____

Name *(Please print)*: _____

Date: _____

Applicant's Declaration:

I confirm that the information I have entered on page 1 is correct.

Pupil Signature: _____

Date: _____

Parent/Guardian Declaration:

I give my consent to this registration and confirm that the information given by my son/daughter/ward is accurate.

Parent/Guardian Signature: _____

Name *(Please print)*: _____

Date: _____

DATA PROTECTION ACT

First Edition stores the personal information you give us to allow us to administer the scheme's programme. We also use it to provide you with current and future information about our other services and opportunities in science, technology, engineering and mathematics.

Please put a cross (X) in the box if you DO NOT give your consent to this use of data.

EDT may choose to use the photographs from *First Edition* activities in promotional material.

Please put a cross (X) in the box if you DO NOT give your consent to this use of photographs of your son/daughter/ward.

Please send completed pupil registration forms to:
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 Alternatively you can fax this form back to 01707 393 133 or email firstedition@etrust.org.uk