

# Register on our website, automated telephone line or using this form.

For children eligible for free milk this will stop the Friday prior to your child's fifth birthday. You will be sent an invoice approximately two weeks prior to this date should you wish to continue with the milk.

If the child is not eligible for free milk we will send an invoice out and payment is required on this invoice before the milk will start.

## I want to register a child for school milk

Complete this form in **BLOCK CAPITALS**. Please note we may contact your child's school to confirm their eligibility for free/subsidised milk based on the information you include in your registration.

### School Details

School name (In full)	
Local Education Authority	
Town	Postcode

### Child Details

Please tick one box below as appropriate

Under 5 years of age  5 years of age or over

School Milk Start Date	/	/	Or start as soon as possible	<input type="checkbox"/>
First Name	Family Name			
Date of Birth	/	/	Class/Teacher	
House No./Name	Street Name			
Town	County			
Postcode				

### Parent/Guardian Details

Mr / Mrs / Miss / Ms / Dr. (Please circle as appropriate)	
First Name	Family Name
Daytime Tel. No.	Evening Tel. No.
Email Address	
Address (if different from above)	
House No./Name	Street Name
Town	County
Postcode	

Please tick here if you wish to be excluded from our mailing list

Signature	Date	/	/
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