



Registration Form

Title	<input type="text"/>
First Name	<input type="text"/>
Surname	<input type="text"/>
Address	<input type="text"/>
Postcode	<input type="text"/>
Tel Number	<input type="text"/>
Mobile Number (optional)	<input type="text"/>
Email Address	<input type="text"/>
Date of Birth	<input type="text"/>

How did you hear about Peace School?

Please write a sentence or two about why you want to be part of Peace School

Please write a sentence or two about yourself, what you do with your time, who you are, etc.

Please let us know how much you are paying to participate in Peace School:

£

SPECIAL NEEDS

- Do you consider yourself to have any impairment or disability? If yes please specify.
- Do you consider yourself to have any learning difficulty? If yes please specify.

Other Comments

Add me to the Peace School mailing list *(please tick)*

Please return this form to: **Peace School, 4 Park Avenue, Pudsey, Leeds, LS28 7TE**

Don't forget to include a cheque to cover your deposit (or the full amount)