



Parent/Guardian Information:

Parent/Guardian's Full Name: _____

Email Address: _____

Mobile Number: _____

Alternative Number: _____

Student 1 Information:

Child's Full Name: _____

Date of Birth: _____

Year Group: _____

Location: _____

Name of School: _____

Any Special Requirements or Considerations:

Student 2 Information:

Child's Full Name: _____

Date of Birth: _____

Year Group: _____

Location: _____

Name of School: _____

Any Special Requirements or Considerations:

Student 3 Information:

Child's Full Name: _____

Date of Birth: _____

Year Group: _____

Location: _____

Name of School: _____

Any Special Requirements or Considerations:

By signing up, you agree to our Terms and Conditions and Privacy Policy.

Thank you for joining our community! We look forward to a fun and enriching experience together.

Parent/Guardian Signature: _____

Date: _____

Please Email this back to sign-up@mathshub.co.uk