U3A PINE RIVERS CLASS REGISTRATION FORM v2.1

To be completed at the start of each term

Class/Activity:……..……..…..…..…… **Tutor/Organiser Name:**…… **Tutor/Organiser Contact No:**…….... **Form started on:**……..….....……..…..…..

MEMBER'S NAME	M/Ship No:	CONTACT NUMBER	E-MAIL ADDRESS	EMERGENCY CONTACT PERSON & PHONE NUMBER (For U3A Pine Rivers or a 3rd party to use in an emergency)